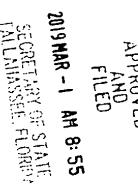
HODDDDOM37;

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



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T.6).



Account#: I2000000088

Date.	03/01/2019		
Name:	MICHAEL PETERSON	_	
Reference #:	1047277	_	
Entity Name:	BITUMINOUS T	ECHNOLOGIES, LLC	
	s of Incorporation/Authorization	_	20
☐ Amend	ge of Agent	SECRETAI TALLAHAS	5 6 10
☐ Reinst	atement		- ₹
☐ Conve	rsion		20
☐ Merge	r		Ś
Dissol	ution/Withdrawal		
☐ Fictitio	ous Name		
Other_			_
Authorized Al Signature:	mounty \$25		

HONG KONG



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	03/01/2019		
	MICHAEL PETERSON		
	#: 1047277		
	BITUMINOUS TECHNOLOGIES, LLC	<u> </u>	
☐ Ame	les of Incorporation/Authorization to Transact Business indment inge of Agent statement version	2019 MAR - 1 AM 8: 55 SECRETARY OF STATE FALLAHASSEE, FLORID!	FILED
_	olution/Withdrawal	•	
	ious Name er		
Authorized ,	Amount: #25		

F: 800.944.6607

F: +852.2682.9790

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOI LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

2 (5)		, le s	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) :	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	No Change	No	Change
	November 5, 2009	M09	000004377
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Corporation Service Company		
. (a)	Registered Agent and Registered Office shown on the record	s of the Florida Dept.	of State:
	1201 Hays Street		
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	
			20
	Tallahassee	FL_32301-252	SECRET SALLARY
(b)	COGENCY GLOBAL INC.		ANI FILE TARY JASSE
	Enter name of NEW Registered Agent and/or NEW Register	ered Office address:	
	115 North Calhoun St., Suite 4		1.41s
	NEW Registered Office Address:		<u>ੋ</u> ਹੈ ਹੈ
	Suite 4		
	Tallahassee	FL 32301	
the cha agent v was/we the arti Signat I herei provisi	imited liability company is not organized under the age or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cless of organization or the operating agreement of the member of a member of all statutes relative to the proper and compligations of my position as registered agent as provey reflect a change in the registered office address	s of the registered d liability company rs of the limited liability the limited liability agree to act in this circ performance of	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in y company. Dave Cohan Printed or typed name of signee s capacity. I further agree to comply with the of my duties, and I am familiar with and accept

Signature of Registered Agent

Tim Mayville, Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00