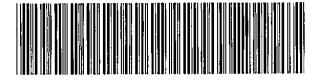
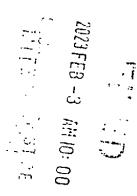
M15000008283

(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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A. EUTLER FEB = 6 2023

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 02/03/2023	-		⇔WALK I
ENTITY NAME_Rose F	aving LLC		
DOCUMENT NUMBER_			
	PLEASE FILE THE A	TTACHED AND RETURN	
XXXXX	Plain Copy Certified Copy Certificate of Status		
***	PLEASE OBTAIN THE FOLLO	DWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & 1 Certificate of Good Standing		
	APOSTILLE' / NOTI	ARIAL CERTIFICATION	
COUNTRY OF DESTINAT NUMBER OF CERTIFICA	TION TES REQUESTED		
TOTAL OWED \$25	<u>-</u>	ACCOUNT #: 120160000	0072
Please call Tina at t	he above number for any	issues or concerns. Thank you	a so much!

COVER LETTER

INHS18 (2/14)

TO: Registration Section Division of Corporations	
SUBJECT: ROSE PAVING AND MA	AINTENANCE, LLC e of Limited Liability Company
Dear Sir or Madam:	• • •
The enclosed Registered Agent/Registered Offi	ce Change and fee(s) are submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
C Runner	. .
Name of Person	
Harbor Compliance	
Firm/Company	
1920 Colonial Villago Lano	
1830 Colonial Village Lane Address	
Address	
Lancaster, PA 17601	
City/State and Zip Code	
professional@harborcompliance.d	com
E-mail address: (to be used for future annual	ual report notification)
For further information concerning this matter.	please call:
C Runner	at (717) 837.3205
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following	amount:
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

STÄTEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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

1.	Name of the limited liability company: ROSE F	PAVING	AND MAI		E, LLC) 	
	7200 W 100TH PLACE		_(b) 7300 W. 100TH PLACE				
2. (a	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ny:	(0)	Mailing address of l	limited lial	bility co	
	BRIDGEVIEW, IL 60455		BRIDG	SEVIEW, IL	60455	5	
			 -				
			****	<u> </u>		- -	
	10/15/2015		M15000	0008283			<u> </u>
3.	Date of filing/registration in Florida	4.	<u> </u>	Document num	ber		
5. ((a) Corporation Service Company						
J. (Registered Agent and Registered Office shown on the reco	ords of the Flor	rida Dept. of Sta	te:			
	1201 Hays Street						
	Registered Office Address (MUST BE FLORIDA STI	REET ADDRE	ESS)	_			
				_		20	
	Tallahassee	_, _{FL} 323	<u>01 </u>	_		2023 FEB	
	Registered Agents Inc.				· {	E9 -) = 122
(1	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Reg</u>	istered Office	address;	<u> </u>	::	ယ်	.,
	Enter have or seemed and a seemed a seemed and a seemed a seemed and a seemed a seemed and a seemed a seemed a seemed and a seemed					= :	j .
	7901 4th St N			_	. (b)	AH IO:	أمسا
	NEW Registered Office Address:				ر . د	00	
	STE 300			_			
	St. Petersburg	_, _{FL} _337	02	_			
the cagen was/ the a	te limited liability company is not organized under to change or changes are made, the Florida street addrest will be identical. Or, in the case of a Florida limit/were authorized by an affirmative vote of the memarticles of organization or the operating agreement.	ress of the re ited liability ibers of the l of the limite	egistered office company, it limited liabili	ce and the busine is hereby confirt ty company or as	ess office ned that	of the the ch	registe ange(s)
_/s/	/Ed Campbell		d Campbel		,, .		
Sig	gnature of a member or authorized representative of a member			Printed or typed r		_	, .,
I he prov the o	ereby accept the appointment as registered agent an visions of all statutes relative to the proper and con obligations of my position as registered agent as pr nerely reflect a change in the registered office addre fied in writing of this change.	nd agree to nplete perfo rovided for i ess, I hereby	act in this cap rmance of my in Chapter 60 v confirm that	pacity. I further the duties, and I am 15, F.S. Or, if this the limited liab.	agree to i familia is docum ility com	comp. r with ent is a pany f	ty with and acc being fi as bee.

Signature of Registered Agent

Bill Havre

- Assistant Secretary