

MI 9 00000 8138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

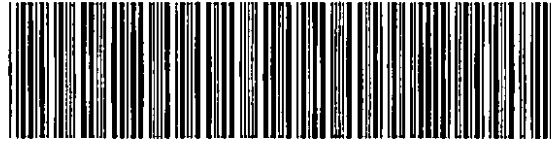
(Business Entity Name)

(Document Number)

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2022 OCT 25 AM 11:36

SECRETARY OF STATE  
TALLAHASSEE, FL



October 20, 2022

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

RE: **Registered Agent Change (SRM Materials, LLC)**

To Whom it May Concern:

Enclosed is a copy of the Registered Agent Change form for SRM Materials, LLC. Also included is a check for \$55, which covers the filing fee and the certified copy.

Sincerely,

SMYRNA READY MIX CONCRETE, LLC

Daniel Gawlak,  
Paralegal

DG/

Enclosure: As stated

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SRM Materials, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

J.D. Kious, General Counsel

Name of Person

SRM Materials, LLC

Firm/Company

1000 Hollingshead Circle

Address

Murfreesboro, TN 37129

City/State and Zip Code

legal@smynareadymix.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel Gawlak

Name of Person

at ( 629 ) 247-5718

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

**STATEMENT 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 company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. Name of the limited liability company: SRM Materials, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

1000 Hollingshead Circle

1000 Hollingshead Circle

Murfreesboro Tennessee

Murfreesboro Tennessee 37129

08/19/2019

M19000008138

3. Date of filing/registration in Florida

4. Document number

5. (a) Gary Ware

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

8302 NE 44th Dr.

Wildwood, FL 34785

(b) Northwest Registered Agent LLC

Enter name of NEW Registered Agent and/or NEW Registered Office address:

7901 4th St N

NEW Registered Office Address:

STE 300

St. Petersburg, FL 33702

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TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

JD Kiouss, General Counsel

[Signature]  
Signature of a member or authorized representative of a member

Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Tom Glover Tom Glover - Assistant Secretary

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00