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Account#: 120000000088

Date:07	7/25/2023	
Name:	Chris Vick	<u></u>
Reference #:	2050123	
Entity Name:	ASPHALT	PRODUCTION LLC
Articles	of Incorporation/Authorizati	on to Transact Business
Amendn	nent	
Change	of Agent	
Reinstat	ement	
☐ Convers	sion	
☐ Merger		
☐ Dissolut	ion/Withdrawal	
Fictitious	s Name	
Other_		
Authorized Amo	ount: \$25.00	

F: 800.944.6607

F: •852.2682.9790

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.

a)	Principal office address of limited liability co		(n	Mail	ing address of limit	ed liability compa
	(<u>Noie: MUST BE STREET ADDRES</u>	<u>V</u> 1		(<u>.</u> 2	Tote: MAY BE POS	<u>SI OFFICE BO.</u>
	No Change			No Change	}	
	September 24, 1998			M98	000001083	
	Date of filing/registration in Florid	a	4.	De	cument number	
(a)	NRAI Services, Inc.					
(**/	Registered Agent and Registered Office shown on the	e records of	the Florida	Dept. of State:		
				1		
	1200 South Pine Island Road					
	1200 South Pine Island Road Registered Office Address (MUST BE FLORID)	I STREET.	ADDRESS,			
		(<i>STREET)</i> , FI	22224			
(b)	Registered Office Address (MUST BE FLORID:		22224		I.A.	20
(b)	Registered Office Address (MUST BE FLORID: Plantation	, FI.	33324		IALL	2029 .
(b)	Plantation COGENCY GLOBAL INC.	, FI.	33324		IALLAHASS	2029 JUL 25
(b)	Plantation COGENCY GLOBAL INC. Enter name of NEW Registered Agent and/or NEW	, FI.	33324		IALLAHASSEE, FLORIDA	2029 JUL 25 AM II: 24

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.

/s/ Joshua Wernig 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. Thereby confirm that the limited liability company has been notified in writing of this change.

/s/ Michael Carlisle

Signature of Registered Agent

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