



DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
03/02/2022	202206001428	TRADE NAME REGISTRATION (RNO)	39.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

AARON WINKEL
328 E ROYAL FOREST BLVD
COLUMBUS, OH 43214

**STATE OF OHIO
CERTIFICATE**

**Ohio Secretary of State, Frank LaRose
4826843**

It is hereby certified that the Secretary of State of Ohio has custody of the business records for
COLUMBUS ASPHALT SERVICES

and, that said business records show the filing and recording of:

Document(s)

TRADE NAME REGISTRATION

Effective Date: 03/01/2022

Document No(s):

202206001428

Date of First Use: 01/04/2020

Expiration Date: 03/01/2027

ADVANTAGE MARKET SOLUTIONS LLC
1788 ARBOR HILL DR
COLUMBUS, OH 43229



United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the
Secretary of State at Columbus, Ohio this
2nd day of March, A.D. 2022.

Ohio Secretary of State

Form 534A Prescribed by:

Date Electronically Filed: 3/1/2022



Toll Free: 877.767.3453 | Central Ohio: 614.466.3910

OhioSoS.gov | business@OhioSoS.gov

File online or for more information: OhioBusinessCentral.gov

Name Registration

Filing Fee: \$39

Form Must Be Typed

CHECK ONLY ONE (1) Box

<input checked="" type="checkbox"/> Trade Name (167-RNO)	Date of first use: <input type="text" value="1/4/2020"/> MM/DD/YYYY	<input type="checkbox"/> Fictitious Name (169-NFO)
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Name being Registered or Reported

Name of the Registrant

Note: If the registrant is a partnership, please provide the name of the partnership. Individual partner names are not permitted but are required on page 2 of the form.

Registrant's Entity Number (if registered with Ohio Secretary of State):

All registrants must complete the information in this section

The general nature of business conducted by the registrant:

Business address:

Mailing Address

City

State

ZIP Code

Complete the information in this section if registrant is a partnership NOT registered in Ohio pursuant to ORC 1776, if partnership is registered, provide registration number on page one.

Provide the name and address of at least one general partner:

Name

Address

NOTE: Pursuant to OAG 89-081, if a general partner is a foreign corporation/limited liability company, it must be licensed to transact business in Ohio; if a general partner is a foreign corporation/limited liability company licensed in Ohio under an assumed name, please provide the assumed name and the name as registered in its jurisdiction of formation.

By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Application must be signed by the registrant or an authorized representative.

Signature

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

By (if applicable)

Print Name

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.