## 684881

**CT** CORPORATION

CORPORATION(S) NAMI	Е	
		SECULETARIC CONTACT ALLIAMASSEE.
5) Resource Recovery of An	nerica, Inc.	90 - 50 - 50 - 50 - 50 - 50 - 50 - 50 -
() Profit () Nonprofit	() Amendment	() Merger 2 2 R
() Foreign	() Dissolution/Withdrawal () Reinstatement	() Mark 2 M
() Limited Partnership () LLC	() Annual Report () Name Registration () Fictitious Name	() Mark  () Other  (X) Change of RA  () Other
() Certified Copy	() Photocopies	() UCC
() Call When Ready (x) Walk In () Mail Out	() Call If Problem () Will Wait	() After 4:30 (x) Pick Up
Name Availability	8/21/02	Order#: 5530090
Document Examiner Updater Verifier	AAM	5000072543759 -08/21/0201041014 Ref#:*****35.00 ******35.00
W.P. Verifier		Amount: \$

660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 C. Coulliste AUG 2 1 2002

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		ent in order to change	e its registered offi	ce or registered agei	nt, or both, in
the State of Fi		on : Resource Recovery o	f Amaniaa Tua		
i. The name (	or me corporan	Off . Resource Recovery o	i America, inc.		
2. The mailing	g address of the	corporation : 700 S. Ro	oyal Poinciana Blvd., s	Ste. 800, Miami Springs,	FL-33166 Q
3. Date of inc	corporation/qua	lification: 8-20-80	Docur	nent number: 684881	- E
		he current registered as			SEE BE
	NRAI Services	Inc.		<u> </u>	01 <b>5</b>
	526 E. Park Av	enue			五 2
	Tallahassee, FL				
5. The name ar	nd address of ti	ne new registered agen (P. O. Box No	t (if changed) and/o ot Acceptable)	or registered office (i	f changed):
	C T Corporation	System		<u> </u>	on the second second
	c/o C T Corpora	tion System, 1200 South I	Pine Island Road,	<u> </u>	
	Plantation, Flori	da 33324	· · · · · · · · · · · · · · · · · · ·		
The street addragent, as change	ress of its regis ged, will be ide	tered office and the stentical.	reet address of the	business office of it	s registered
Such change wauthorized by	vas authorized the board.	by resolution duly add	pted by its board o	of directors or by an	officer so
(Signature	of an officer, chair	man or vice chairman of the	board)	(Date)	103
Isabel Diaz, Secret		yped name and title)		• • • • • • • • • • • • • • • • • • • •	and a company
I further agree	to comply with f my duties, an nt.	ered agent and to acce the appointment as re the provisions of all d I am familiar with a	gisterea agent and	agree to act in this	capacity.
	Signature of Register	ered Agent)		(Date) 8/21/02	
If signing on beha	lf of an entity:	CONNE BRYAN	' 000mm		
	Typed or Printed N	- O-O-I AN	DECEMPTADY :		

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314