•	(Requestor's Name)			
	(Address)			
	(· ·==· -= -,			
	(Address)			
	(City/State/Zip/Phone #)			
	(City/State/Zip/Phone #)			
	_			
PICK-UP	TIAW	MAIL		
	(Business Entity Name)			
(Document Number)				
Certified Copies	Certificates of S	Status		
Special Instructions to	Filing Officer:			

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO. : I2000000195				
	REFERENCE : 470984 8447878				
	AUTHORIZATION : COST LIMIT : \$ 35.00				
	COST LIMIT : \$ 35.00				
ORDER DATE :	May 16, 2024				
ORDER TIME :	9:29 AM				
ORDER NO. :	470984-002				
CUSTOMER NO:	8447878				
		_			
CHANGE OF AGENT					
NAME:	COASTAL WASTE & RECYCLING OF BAY COUNTY, INC.				

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt -- EXT#

EXAMINER:

- , - , STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.050 inge is submitted for a corporation organ r to change its registered office or regist	nized under the laws of the State of FL	-		
1. The name of t	he corporation: COASTAL WASTE & RE	ECYCLING OF BAY COUNTY, INC.			
2. The principal	office address:AVENUE SUITE 200 BOCA RATON, F				
3. The mailing a	ddress (if different): 2481 NW 2ND AVE	NUE 201 Boca Raton, FL 33431			
4. Date of incorp	ooration/qualification: 05/22/2014	Document number: P1400004	5822		
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)					
	Pantano, Brendon J	-			
	2481 NW 2ND AVENUE 201		2024 HAY 24		
	Boca Raton, FL 33431				
6. The name and (if changed):	street address of the new registered ages	nt (if changed) and /or registered offic	e		
	1201 Hays Street				
		NOT acceptable			
	Tałlahassee	FL 32301			
The street addre	ess of its registered office and the street be identical.	address of the business office of its r	registered agent,		
Such change wa authorized by th	is authorized by resolution duly adopted the board, or the corporation has been no	I by its board of directors or by an of tified in writing of the change.	ficer so		
/s/Matthew C	Cowan	Matthew Cowan	Secretary		
I hereby accept I further agree t of my duties, an document is bei corporation has	te of an other of director the appointment as registered agent an o comply with the provisions of all state of I am familiar with and accept the obli- ng filed merely to reflect a change in the been notified in writing of this change.	Printed or typed name and title d agree to act in this capacity, utes relative to the proper and compl igation of my position as registered a e registered office address, I hereby	lete performance agent. Or, if this confirm that the		
$\sim \gamma \sim$	n Service Company	05/07/2024			
Signature of Registered Agent Date					
If signing on be	half of an entity:				
	Asst Vice President				
•	* * * FILING FE	CE: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13) 470984-2