| | Name and Address of Current Registered Agent. | | | | | |
|--|--|--|---------|----------------|------------|--|
| | SOTO, MIGUEL 3127 W IDLEWILD ST TAMPA, FL 33614 US | | | | | |
| The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. | | | | | | |
| | SIGNATURE: | MIGUEL SOTO | | | 03/11/2015 | |
| | | Electronic Signature of Registered Agent | | | Date | |
| Authorized Person(s) Detail : | | | | | | |
| | Title M | MGRM | Title | MGRM | | |
| | Name F | PERALTA, TEOFILO | Name | SOTO, MIGUEL | | |
| | Address 3 | 3165 SEDGWICK AVE | Address | 5115 N 47TH ST | | |
| | | | | | | |

Current Principal Place of Business: 5115 N 47TH ST TAMPA, FL 33610

Current Mailing Address:

DOCUMENT# L13000126066

Entity Name: AMARILLO RECYCLING, LLC

5115 N 47TH ST TAMPA FL 33610

FEI Number: 47-3383986

City-State-Zip: BRONX NY 10463

Name and Address of Current Registered Agent:

| I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and |
|---|
| that my name appears above, or on an attachment with all other like empowered. |

SIGNATURE: MIGUEL SOTO

MGRM

City-State-Zip: TAMPA FL 33610

03/11/2015

Electronic Signature of Signing Authorized Person(s) Detail

2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

FILED Mar 11, 2015 **Secretary of State** CR8738354625

Certificate of Status Desired: No

Date