### 2021 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M03000004175

Entity Name: ADVANCED DISPOSAL SERVICES STATELINE, LLC

**FILED** Jul 23, 2021 Secretary of State 8375052703CC

### **Current Principal Place of Business:**

800 CAPITOL STREET **SUITE 3000** 

HOUSTON, TX 77002

## **Current Mailing Address:**

800 CAPITOL STREET **SUITE 3000** HOUSTON, TX 77002 US

FEI Number: 30-0219227 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Address

Address

City-State-Zip:

SIGNATURE: MARK A. LOCKETT

Electronic Signature of Registered Agent

Date

# Authorized Person(s) Detail:

**MEMBER** Title **PRESIDENT** 

ADVANCED DISPOSAL SERVICES MYHAN, DAVID M. Name Name SOUTH, LLC

Address 800 CAPITOL STREET 800 CAPITOL STREET

**SUITE 3000 SUITE 3000** 

City-State-Zip: HOUSTON TX 77002 City-State-Zip: **HOUSTON TX 77002** 

Title VΡ VΡ Title

Name FARMER, DOMENICA Name CARROLL, THOMAS G.

800 CAPITOL STREET Address 800 CAPITOL STREET Address

**SUITE 3000 SUITE 3000** 

HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002 City-State-Zip:

Title VP, ASST. TREASURER

Title VP, ASST. SECRETARY Name LOCKETT, MARK A. Name LAMBROS, JAMES F.

800 CAPITOL STREET Address Address 800 CAPITOL STREET

**SUITE 3000 SUITE 3000** 

City-State-Zip: HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002

Title VP, TREASURER Title VP, CFO, CONTROLLER

Name REED, DAVID L. NAGY, LESLIE K. Name

Address 800 CAPITOL STREET 800 CAPITOL STREET **SUITE 3000** 

**SUITE 3000** 

City-State-Zip: HOUSTON TX 77002 HOUSTON TX 77002

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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.

Electronic Signature of Signing Authorized Person(s) Detail

07/23/2021 VICE PRESIDENT & ASSISTANT TREASURER

Date

# Authorized Person(s) Detail Continued:

Title VP, SECRETARY Title VP

Name TIPPY, COURTNEY A. Name WILSON, JAMES A.

Address 800 CAPITOL STREET Address 800 CAPITOL STREET

SUITE 3000 SUITE 3000

City-State-Zip: HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002

TitleASST. TREASURERTitleASST. SECRETARYNameBENNETT, JEFF R.NameFOSTER, JANNE C.

Address 800 CAPITOL STREET Address 800 CAPITOL STREET

SUITE 3000 SUITE 3000

City-State-Zip: HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002

Title ASST. SECRETARY Title ASST. SECRETARY

Name KAPLAN, RONALD M. Name SILVA, LISA

Address 800 CAPITOL STREET Address 800 CAPITOL STREET

SUITE 3000 SUITE 3000

City-State-Zip: HOUSTON TX 77002 City-State-Zip: HOUSTON TX 77002