

FD1000003110

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

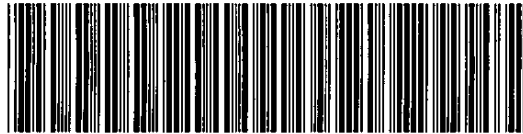
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts JUL 11 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Onyx Waste Services, Inc., a Wisconsin corp.
(Name of Corporation)

DOCUMENT NUMBER: F01000003110

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joyce Hansen

(Name of Contact Person)

Onyx Waste Services, Inc.

(Firm/Company)

125 S. 84th Street, #200

(Address)

Milwaukee, WI 53214

(City/State and Zip Code)

For further information concerning this matter, please call:

Joyce Hansen

(Name of Contact Person)

at (414)

479-7802

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐

\$35.00 Filing Fee

☐

\$43.75 Filing Fee &
Certificate of Status

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\$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

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\$52.50 Filing Fee,
Certificate of Status &
Certified Copy
(Additional copy is
enclosed)

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO
APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F01000003110

(Document number of corporation (if known))

1. Onyx Waste Services, Inc.
(Name of corporation as it appears on the records of the Department of State)

2. Wisconsin 3. 6/6/2001
(Incorporated under laws of) (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? July 1, 2006

5. Veolia ES Solid Waste, Inc.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)


6. If the amendment changes the period of duration, indicate new period of duration.

-----§

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)


(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Michael K. Slattery

(Typed or printed name of person signing)

VP & Sec.

(Title of person signing)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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180 181 183

United States of America

State of Wisconsin



DEPARTMENT OF FINANCIAL INSTITUTIONS

To All to Whom These Presents Shall Come, Greeting:

I, RAY ALLEN, Deputy Administrator, Division of Corporate & Consumer Services, Department of Financial Institutions, do hereby certify that

ONYX WASTE SERVICES, INC.

is a domestic corporation or a domestic limited liability company organized under the laws of this state and that its date of incorporation or organization is July 7, 1992.

I further certify that the original Articles of Incorporation were filed on July 7, 1992, under the name WASTE HOLDING COMPANY, INC.; and, that Articles of Amendment were filed on November 4, 1992, changing the name to SUPERIOR ENVIRONMENTAL SERVICES, INC.; and, that Articles of Amendment were filed on January 1, 1994, changing the name to SUPERIOR SERVICES, INC.; and, that Articles of Amendment were filed on January 2, 2002, changing the name to ONYX WASTE SERVICES, INC.; and, that Articles of Amendment were filed on June 12, 2006, changing the name to VEOLIA ES SOLID WASTE, INC. effective July 1, 2006.

I further certify that said corporation or limited liability company has, within its most recently completed report year, filed an annual report required under ss. 180.1622, 180.1921, 181.1622 or 183.0120, Wis. Stats., and that it has not filed articles of dissolution.



IN TESTIMONY WHEREOF, I have
hereunto set my hand and affixed the official seal
of the Department on June 15, 2006.

A handwritten signature in black ink, appearing to read "Ray Allen".

RAY ALLEN, Deputy Administrator
Division of Corporate & Consumer Services
Department of Financial Institutions

BY: A handwritten signature in black ink, appearing to read "Robert L. Harris".