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Account Name

: C T CORPORATION SYSTEM

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REGISTERED AGENT CHANGE

SYNAGRO OF TEXAS-VITAL-CYCLE, INC.

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

	-	.0302, 007.1308, or 617.1508. Florida S corganized under the laws of the State of	
Wisconsin	in order to change its registere	d office or registered agent, or both, in th	he Stat
of Florida.			
1. The name of	the corporation; Sympto of Texas-Vital-	Cycle, Inc.	
2. The principa	I office address: 1800 Bering Dr., Suite 10	00, Houston, TX 77057	
3. The mailing	address (if different):		
4. Date of incom	poration/qualification: 10/18/1995	Document number: F95000005078	
	riment of State:	i agent and registered office on file with th	l e
	Corporation Service	€ Company	•
	1201 Haye	s St	
	Tallahassee, FI	. 32301	
6. The name as changed):	nd street address of the new registered	agent (if changed) and /or registered of	fice (ii
	C T Corporation	i System	
	c/o C T Corporati	as Stuling	
•	Q.O. Box or personal mailbox		
	1200 South Pine Island Road, P	lantation, Florida 33324	
aftern't by thank	ea wiil de idéiligeal.	t address of the business office of its regi	
L. I		d by its board of directors or by an office otified in writing of the change. Jemifer Sirski, Secretary	rso
	continues or vice chairman at the board)	(Franked or typed burne and title)	_
l nevery accept I further agree y performance of registered agen office address,)	the appointment as registered agent as comply with the provisions of all sta my duties, and I am familiar with and t. Or, if this document is being filed m hereby confirm that the corporation h	nd agree to act in this capacity. tutes relative to the proper and complete accept the obligation of my postiton as erely to reflect a change in the registered as been notified in writing of this change.	†
By: DOA	use Bell	7/19/64	
	gramme of Registered Agent) Deni	se Beil (Dale)	
I signing on debai	COLAN ENTIFY:	t Secretary	
(X)	yped or Printed Name)	(Capacity)	-
	* * * FILING FEE:	7 7 7	

Mair checks payable to Florida Department of State and Mail to: Division of Cordorations, P.O. Box 6327, Tallahasses, FL 32314