**Document Number Only** 001673 CT CORPORATION SYSTEM Requestor's Name 660 East Jefferson Street Address 32301 Tallahassee, 222-1092 Zip Phone State City CORPORATION(S) NAME <del>30000232091</del>3--0 -10/15/97--01069--004 \*\*\*\*\*35.0U \*\*\*\*\*35.00 () Profit () Merger () Amendment () NonProfit ( ) Limited Liability Co. () Mark () Dissolution/Withdrawal () Foreign () Other ucc Filing () Annual Report () Limited Partnership Change of R.A. () Reservation () Reinstatement ) Fic. Name C CUS () Photo Copies () Certified Copy ( ) After 4:30 () Call if Problem () Cail When Ready Pick Upm Walk In - J () Mail Out Name PLEASE RETURN EXTRADEOPIES Availability FILE STAMPED 10-15 Document Examiner Updater Verifier

CR2E031 (1.89)

Acknowledgment

W.P. Verifier

## Florida Department of State, Jim Smith, Secretary of State

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

Florida Statutes, the undersigned corp Michigan submits the following	607.0502, 617.0502, 607.1508, or 617.1508, or or 617.1508, or 617.1508
or registered agent, or both, in the Sta	TAS 97
to. The name of the cornoration is:	United Waste Systems Leasing, Inc. 20
Ta. The harrie of the corporation to.	်ဂျွ <u>ို</u> <u>ဟ</u>
1b. Date of incorporation 04-02-9	7 Document number
qualification  2. The name and address of the cur	කි <sub>රි</sub> <b>ගු</b>
	nc. 801 Northeast 167th St. Ste. 300
North Miami Beach, Florida 3	<del>-</del>
3. The name and address of the new (P.O. Box Not Acceptable C T CO.	registered agent and office:  PPORATION SYSTEM
C/O C T CORPORATION SYSTEM, 120	O South Pine Island Rd., Plantation, Florida 3332
of its registered agent as changed wi	olution duly adopted by its board of directors or by
PROCESS FOR THE ABOVE STATE IN THIS CERTIFICATE, I HEREBY A AGENT AND AGREE TO ACT IN THE WITH THE PROVISIONS OF ALL ST	ERED AGENT AND TO ACCEPT SERVICE OF ED CORPORATION AT THE PLACE DESIGNATED IN CCEPT THE APPOINTMENT AS REGISTERED IS CAPACITY. I FURTHER AGREE TO COMPLY ATUTES RELATIVE TO THE PROPER AND COMTIES, AND I AM FAMILIAR WITH AND ACCEPT IN AS REGISTERED AGENT.  SIGNATURE BY:  VICTOR ALFANO  (Registered Agent) ASST. SECY.  DATE  10-2-97

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

CR2E045 (7-91) (FLA. - 2194 - 3/4/92) FILING FEE: \$35.00