

Electronic Filing Cover Sheet

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To:

Division of Corporations

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: (850) 205-0300

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone

Fax Number

: (850)222-9428

REGISTERED AGENT CHANGE

SYNAGRO OF FLORIDA - ECOSYSTEMS, INC.

Certificate of Status	0
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Comporate Filing

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida St	arutes,
this statement of change is submitted for a corporation organized under the laws of the State of	- 01-4
Florida in order to change its registered office or registered agent, or both, in the	e Slak
of Florida.	
). The name of the corporation: Synagro of Florida - Ecosystems, Inc.	
2. The principal office address: 1800 Bering Dr., Suite 1000, Houston, TX 77057	
	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 08/15/1985 Document number: H71402	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:)
Corporation Service Company	
1201 Hayes St	
Tallahassec, FL 32301	
6. The name and street address of the new registered agent (if changed) and /or registered off changed):	ice (if
CT Corporation System	
e/a CT Corporation System	
(P.O. Box or personal mailbox NOT acceptable)	
1200 South Pine Island Road, Plantation, Florida 33324	
The street address of its registered office and the street address of the business office of its registagent, as changed will be identical.	tered
Such change was authorized by resolution duly adopted by its board of directors or by an officer authorized by the board, or the corporation has been notified in writing of the change. Jamifer Sinski, Secretary	f 50
Signature of an officer, Charmon or vice chairman of the board) (Friends or typed name and bild)	_
thereby accept the appointment as registered agent and agree to act in this capacity. If further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
CT Corporation System	
(Signature of Registered Apppl) (Signature of Registered Apppl)	
f signing on behalf of an entity: Denise Bell	
Assistant Secretary	_
(Typed at Printed Name) (Captailty)	_

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314