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PICK-UP WAIT MAIL
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2021 JAN -6 AM 8: 50

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 598066 4311279

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : January 6, 2021

ORDER TIME : 12:40 PM

ORDER NO. : 598066-005

CUSTOMER NO: 4311279

DOMESTIC AMENDMENT FILING

NAME: SUNSHINE RECYCLING SERVICES OF

S.W. FLORIDA, L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

YX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Robinson -- EXT#

EXAMINER'S INITIALS:

COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration S Division of Co			
Sunshine I	Recycling Services of S.W. Flo	rida, L.L.C.	
SOBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
		Same of Limited Liability Company E(s) are submitted for filing. this matter to the following: Name of Person Firm/Company Address City/State and Zip Code il address: (to be used for future annual report notification) or, please call: at () Area Code Daytime Telephone Number Fee & S60.00 Filing Fee,	
		Name of Person	
		Firm/Company	
	· · · · · · · · · · · · · · · · · · ·	Address	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report noti	fication)
For further information of	concerning this matter, please c	all:	
N'ama (of Person	at ()	a Tulophana Number
rvaine (n reison	Area Code Dayum	e refermone (Sumber
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
Mailing Addres			ation.
Registration Division of C			
P.O. Box 632			₹

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunshine Recycling Services of S.W. Florida, i		
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor	npany were filed on 1/31/2001	and assigned
Florida document number L01000001631		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
Coastal Waste & Recycling of SW Florida, LLC		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	(SS)	
Enter new mailing address, if applicable:		52
(Mailing address MAY BE A POST OFFICE BOX)		1 2 N
		0, 1
B. If amending the registered agent and/or registered of	office address on our records, <u>enter th</u>	e name of the new register
agent and/or the new registered office address here:		. φ. σ.
		50
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	, Flori	
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I 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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			_________\Add
			□Remove
			☐ Change
			DAdd
			□Remove
			□Add
			Remove
			□ Change
			□Add
			□Remove
			Change

Effective date, if other than the date of filing:		rmation, enter change(s) here: (Attach additional sheets, if necessary.)	
If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The effective date on the Department of State's records. The 90th day after the rid is filed. Dated January 6 2021 Signature of a member or authorized representative of a member			-
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Signature of a member or authorized representative of a member	January 6	2021	
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Brendon Pantano		Signature of a member or authorized representative of a member	
	Brendon Pantano		

Filing Fee: \$25.00