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SECRETARY OF STATE
TALLAHASSEE FLORINA

T. HAMPTON

SEP - 5 2008

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: North Florida Waste Management CLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tony Zani (Name of Person)
Worth Florida wasternangement LLC (Firm/Company)
13307 Solar dr # Su3
Jacksonville FL 32258 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (904) 881 - 584 7 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

North Florida	waste r	nanage	ment, L	LC		
(Name of the Limited Lia (A Flo	nbility Company as it i prida Limited Liability (<u>now appears on o</u> Company)	<u>ur records.</u>) 2/6/08			
The Assistance Communication Condition I to All Inc.	r. c = =	~ .	· ' · ` —		•	
The Articles of Organization for this Limited Liabi		led on Old C	71700	and assign	ied	
Florida document number 68032						
20000	13398					
This amendment is submitted to amend the following	ng:					
A. If amending name, enter the new name of the	e limited liability cor	npany here:				
The new name must be distinguishable and end with th "L.L.C."	e words "Limited Liab	ility Company," th	e designation "I	LC" or the abb	reviation	
Enter new principal offices address, if applicable	e:			= •		
(Principal office address MUST BE A STREET ADDRESS)				<u>₩</u>		
•				AR)		
Enter new mailing address, if applicable:		•		က္ဆ	ļΠ	
(Mailing address MAY BE A POST OFFICE BOX)				T.S.T.		
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B. If amending the registered agent and/or registered agent and/or the new registered office		iress on our re	cords, <u>enter t</u>	he name of t	<u>he new</u>	
Name of New Registered Agent:	Kristi		-			
New Registered Office Address:	13307	Solar	dr			
	13307 Solar dr (Enter Florida street address)					
<u>-</u>	Jack So (City)				8	
	(City)			(Zip Code)		
N Th	4 3 4 4					

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title Name <u>Address</u> **Type of Action** mben Katerina Zajni mgen Stephen Chapko □ Add 🗖 Add Remove _ Add Remove ☐ Add ☐ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) want to remove Stephen Chapko and add Kristi Cattaneo August 27th, 2008. Signature of a member or authorized representative of a member Cattaneo
Typed or printed name of signee ナスデ

Page 2 of 2

Filing Fee: \$25.00