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TALLAHASSEE, FLORIDA

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EXAMINER



ACCOUNT NO. : I2000000195 REFERENCE : 7782044 AUTHORIZATION COST LIMIT ORDER DATE: May 4, 2011 ORDER TIME : 12:21 PM ORDER NO. : 766573-025 CUSTOMER NO: 7782044 CHANGE OF AGENT NAME: EWS CENTRAL FOLRIDA HAULING, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER: ______

CONTACT PERSON: Troy Todd -- EXT# 2940

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: EWS CENT	TRAL FLORIDA HAULING, LLC
2. (a) Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	ONE DIVEDWAY CHITE 1400 2
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	HOUSTON, TX 77056 SAME
5/14/2008	L08000048248
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	NRAI SERVICES, INC.
Registered Office Address:	515 E. PARK AVE. TALLAHASSEE FL 32301 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	Corporation Service Company
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassee ,FL 32301
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office and the business ase of a Florida limited liability company, it is by an affirmative vote of the members of the limited
Michael A Roy (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified Corporation Service Company By: /s/ TROY TODD (Signature of Registered Agent)	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00