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EXAMINER

DIVISION OF CORPORATION



ACCOUNT NO. : I2000000195 766573 REFERENCE : 7782044 AUTHORIZATION COST LIMIT ORDER DATE: May 4, 2011 ORDER TIME : 12:20 PM ORDER NO. : 766573-010 CUSTOMER NO: 7782044 CHANGE OF AGENT NAME: WRH GAINESVILLE, 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:	WRH GAINE	ESVILLE, LLC	<u>.</u>
2. (a) Principal office address of limited lia (Note: MUST BE STREET ADDR	RESS)	.C/O.WCA WASTE ST ONE RIVERWAY, SU HOUSTON, TX 77056	ПТЕ 1400
(b) Mailing address of limited liability c (Note: MAY BE POST OFFICE E		SAME	0,3
06/25/2008		L08000062115	ot. of State:
3. Date of filing/registration in Florida	4.	Document number	0 3
5. (a) Registered Agent and Registered Of	fice shown on the	e records of the Florida Dep	ot. of State:
Registered Agent:	<u>7</u>	NRAI SERVICES, INC	·
Registered Office Address:	<u>5</u> 1	115 E. PARK AVE. TALLAHASSEE FL 32	
(b) Enter name of NEW Registered Age			
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		Corporation Service Cor	npany
		201 Hays Street	
IMOST BE FLORIDA STREET AL		<u> allahassee</u>	_,FL_ <u>32301</u>
If the limited liability company is not organithat after the change or changes are made, the office of the registered agent will be identically confirmed that the change(s) was/we liability company or as otherwise provided is limited liability company. (Signature of a member or authorized representative of a member or authorized representative of a member of a member of a member or authorized representative of a member of	ne Florida street a al. Or, in the case are authorized by a in the articles of o	ddress of the registered offi e of a Florida limited liabilit an affirmative vote of the m	ce and the business ty company, it is sembers of the limited
(Printed or typed name of signee)			
I hereby accept the appointment as register, comply with the provisions of all statutes rel am familiar with and accept the obligations F.S. Or, if this document is being filed to me confirm that the limited liability company has Corporation Service Company By: /s/ TROY TODD (Signature of Registered Agent)	ed agent and agre ative to the prope of my position as rely reflect a cha is been notified in	ee to act in this capacity. It and complete performant registered agent as provide inge in the registered office writing of this change.	further agree to se of my duties, and I sed for in Chapter 608, address, I hereby

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