## L11000066819

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(//u	uiess <i>)</i>	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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## **COVER LETTER**

	egistration Se ivision of Cor			
CHDICA		ASTE AND RECYCLING SE	RVICES LLC	
SUBJECT	) : _ <del></del>	Name of Lim	ited Liability Company	<del></del>
The enclos	sed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	ırn all correspo	ondence concerning this matter	to the following:	
		IRA R. SHAPIRO		
			Name of Person	
		IRA R. SHAPIRO P.A.		
			Firm/Company	2.0
		16375 NE 18 AVENUE, S	SUITE 225	2022 NOV 30 TH 11: 30
			Address	
		NORTH MIAMI BEACH.	, FL 33162	
			City/State and Zip Code	
		E-mail address: (	to be used for future annual report notifi	cation)
For further	information c	oncerning this matter, please c	all:	
IRA R. SE	IAPIRO		305 944-3936	
	Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is	s a check for th	ne following amount:		
<b>\$25.00</b>	) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
R	<u>lailing Addres</u> egistration S	Section	Street Address: Registration Sec	
Division of Corporations P.O. Box 6327		7	Division of Corp The Centre of Ta	
T	allahassee, I	FL 32314	2415 N. Monroe	Street. Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

- GREAT WASTE AND RECYCLING SERVICES LLC		
(Name of the Limited Liability Company a (A Florida Limited Liab	as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company we florida document number L11000066819	ere filed on 06/08/2011	_ and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability	y company here:	
he new name must be distinguishable and contain the words "Limited Liability (	Company," the designation "LLC" or the abbre	viation "L.L.C."
nter new principal offices address, if applicable:		<del>-</del>
Principal office address MUST BE A STREET ADDRESS)	ري 	207
_		2 7
	7-14: 7-12:	ω ω
nter new mailing address, if applicable:	##1.F. #	0
Mailing address MAY BE A POST OFFICE BOX)		Marin Marin
	-116	
<del>-</del>	, , ,	<u> </u>
3. If amending the registered agent and/or registered office add gent and/or the new registered office address here:	ress on our records, enter the name o	of the new regis
Name of New Registered Agent:		<del></del>
New Registered Office Address:		
	Enter Floridu street address	
	, Florida	
	Cin	Zin 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>	. Name	<u>Address</u>	Type of Action
MGR	RODNEY C. WALTERS	9521 E. BAY HARBOR DRIVE, #902	<b>=</b> Add
		BAY HARBOR, FL 33154	□Remove
			□Change
			□Add
			Remove
			30 Add AGC High High Participation of the control
			□Change
			□Adđ
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	<del></del>		□Add
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ective date, if other than the date of filing:  effective date is listed, the date must be specific and cannot be prior to date of filing or the date of f	(optional) more than 90 days after filing.) Pursuant to 60	5.020
e: If the date inserted in this block does not meet the applicable statutory fill ument's effective date on the Department of State's records.	ng requirements, this date will not be lis	ted a
•		
cord specifies a delayed effective date, but not an effective time, at 12:01 a.m.	on the earlier of: (b) The 90th day aft	er the
s filed.		
ed Movemby 21 2,22		
ed November 21. 2072.  Berly Chille  Signature of a member or authorized representative		

Filing Fee: \$25.00