L130000160521

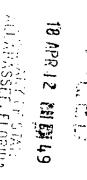
(Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	_	(Requestor's Name)				
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	_	(Address)				
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)					
(Business Entity Name) (Document Number) Certified Copies Certificates of Status		(City/State/Zip/Phone #)				
(Document Number) Certified Copies Certificates of Status		PICK-UP WAIT MAIL				
Certified Copies Certificates of Status	(Business Entity Name)					
	(Document Number)					
Special Instructions to Filing Officer:		Certified Copies Certificates of Status				
	Special Instructions to Filing Officer:					

Office Use Only



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COVER LETTER

Division of Corporations					
Pro-Tech Waste Services, LLC SUBJECT:					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
Antella Townsend					
Name of Person					
Pro-Tech Waste Services, LLC					
Firm/Company					
P.O. Box 470223					
Address					
Miami, FL 33247					
City/State and Zip Code					
pts1@att.net					
E-mail address: (to be used for future annual r	report notification)				
For further information concerning this matter, plea	ase call:				
Antella Townsend	305 763-9310				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amo	ount:				
□ \$25 Filing Fee	\$55 Filing Fee & Certified Copy				
INHS18 (2/14)					

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	Name of the limited liability company: Pro-Tech V	Vaste Ser	vices, LLC	
2. (a)	5941 NW 21st Ave Miami El 33142	(h	P.O. Box 470223, Miami, FL 33247	
z. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
3.	04/24/2013 Date of filing/registration in Florida	4.	L13000060521 Document number	
5. (a	David N. Larmond, Sr.			
	Registered Agent and Registered Office shown on the records 5941 NW 21st Avenue, Miami, FL 33142			
	Registered Office Address (MUST BE FLORIDA STRE	<u>D</u>		
	,	, FL		
(b	Antella Townsend			
(5	, 	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	5941 NW 21st Avenue, Miami, FL 33142	SSET TO THE		
	NEW Registered Office Address:		FLORIDA	
		, FL		
the cagent was/the a Sig I her provide to me notification.	t will be identical. Or, in the case of a Florida limite were authorized by an affirmative vote of the member rticles of organization or the operating agreement of matter of a member or authorized representative of a member reply accept the appointment as registered agent and	s of the regind liability cours of the limited	istered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in	