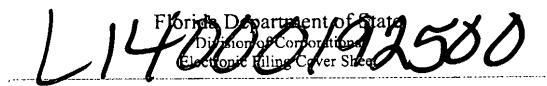
7/11/2018

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180002019403)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (514)280-3338 Phone : (954)208-0845 Fax Number

••Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN COVANTA DADE RENEWABLE ENERGY, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION

	Renewable Energy, LLC			
(Name of the Limited Liability (A Florida)	v Company as it now appears Limited Liability Company)	ou our records.)		
The Articles of Organization for this Limited Liability Co	omnany were filed on	12/31/2014	and assigned	
- 1.14000103500				
Florida document number	_•			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company he	<u>re</u> :		
			6	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the de	signation "LLC" or the	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDR.	FCC	V	湿 一 四	
(Principal office dauress MCS) BE A STREET AINTE	<u> </u>		79 E O	
			0000	
			ORIGINAL S	
Enter new mailing address, if applicable:			<u></u>	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered agent and/or the new registered office address and of New Registered Agent:	tered office address on	our records, end	The name of the nex	
New Registered Office Address:		_		
THE WEGISTER OF THE THINKS	Enter Flor	ida street address		
	, Florida			
	City	 -	Zip Code	
New Registered Agent's Signature, il changing Registered	d Agent:			
I hereby accept the appointment as registered agent of provisions of all statutes relative to the proper and concept the obligations of my position as registered as being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of zent as provided for in C	my duties, and Lai Thapter 605, F.S. C	n familiar with and Or, if this document is	
	If Changing Registered Ag	ent. <u>Signature of New</u>	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>	<u>Name</u>	Address	Type of Action
Secretary	Timothy J. Simpson	445 South St.	Sa Add
		Morristown, NJ 07960	☐ Remove
			☐ Change
VP - Tax	Paola Taddeo	445 South St	⊠ Add
		Morristown, NJ 07960	Remove
			☐ Change
EVP CFO	Bradford J. Helgeson	445 South St.	🔀 Add
		Morristown, NJ 07960	Remove
			Change
			Add
			Remove
			SSEE - Add
			FLORIDA Remove
			☐ Change
			☐ Remove
			☐ Change

							
				-			
	,						
						سـ	<u> </u>
					.,	- 1 8	
						77	- 11
				· · · · · · · · · · · · · · · · · · ·		- 15.75	<u> </u>
						F. 9.	Z O
						100	, op
						S.	55
			. -	<u> </u>			
			 .	··			
						 	
		<u> </u>					
Effective d	late, if other than	ı the date of fili	ne:		(optional)	
Note: If the	late, if other than e doe is listed, the dot e date inserted in the effective date on t	nis block does not	t meet the applic	abic statutory m	more than 90 days ing requirements	after filing.) Pursu i, this date will n	ant to 605,0207 (2 of he listed as th
the record) The 90t	specifies a del h day after the	ayed effective record is filed	date, but no d.	ot an effective	time, at 12:	01 a.m. on th	ne earlier of:
	July 6		2018	A=: (
Dated			1/	h)			
Dated		Signature of	a member or bath	orizon renibsentati	ve of a member	·	
Dated		Signature of we,as Authorized	<i>P</i> ,X	riza vep: escutati			

Page 3 of 3

Filing Fee: \$25.00