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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

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

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To: , Page: 3 of 5 2024-04-16 07:08:52 PDT 19548277645 From: Kaity Toon

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co (A Florida Lim	minany as it now appears on our recordined Liability Company)	ds.)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L14000192500</u> .	pany were filed on 12-17-2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Reworld Dade, LLC		
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		202 A.T.
	<del>.</del>	
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, <u>ente</u>	r the name of the new regist
		· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:		्रे ज
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Florida street addre	73
		lorida
	Cuv	Zip 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

From: Kaity Toon

## If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Vqq
			□Remove
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Effective date, if other than the (If an effective date is listed, the date mu Note: If the date inserted in this bi document's effective date on the D	lock does not meet the applicable	(optional)  date of filing or more than 90 days after filing ) Pursuant to 605.0 e statutory filing requirements, this date will not be listed	)207 (3 I as th
he record specifies a delayed effectivord is filed.	e date, but not an effective time,	, at 12:01 a.m. on the earlier of: (h) The 90th day after t	the
Dated April 16th	, 2024		
Playher	Signature of a member or authorize		
	Signature of a member or authorize	ed representative of a member	
Praveena McGhee			
<u></u>	Typed or printed n	ume of signee	