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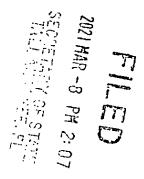
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COVER LETTER

TO: Registration So Division of Co			
SUBJECT:UA	lITED WASTE	SERVICES, LLC	
		ed Liability Company	
	••		
The enclosed Articles of	Amendment and fee(s) are subn	nitted for filing.	
Please return all correspo	ondence concerning this matter to	o the following:	
	DANIEL	M PETA Name of Person	
	UNITO	ED WASTE SER	EVICES, LLL
	523 E	LM WOOD CT Address	2021 MAR SECTION
	<u>Kissi</u>	IMEE /FLORIDA City/State and Zip Code	2/17/12: \$
	SUPPORT E-mail address: (to	City/State and Zip Code WASTEVILLE. Co be used for future annual report not	OM PR 2: Of Classical Control of Cation)
For further information of	concerning this matter, please cal		:7
DANIEL	1 PENA	at (<u>321</u>) 417 -	4411
Name o	of Person	Area Code Daytin	e Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 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)
Mailing Addres Registration	_	<u>Street Address:</u> Registration Se	ction
Division of Corporations		Division of Cor	
P.O. Box 632	27	The Centre of T	
Tallahassee,	FL 32314	2415 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UNITED WASTES	SERVICES, LLC
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	Jability Company)
The Articles of Organization for this Limited Liability Company	were filed on $01/29/2020$ and assigned
Torida document number <u>L20000035228</u> .	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liabi	lity company here:
WASTE VILLE, LLC the new name must be distinguishable and contain the words "Limited Liabili	
he new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADDRESS)	28 28 28
	三
	CO CO
Inter new mailing address, if applicable:	တ်ထဲ 😈 🚺
Mailing address MAY BE A POST OFFICE BOX)	
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ddress on our records, <u>enter the name of the new regi</u>
Name of New Registered Agent:	
New Registered Office Address:	
•	Enter Florida street address
	, Florida
	City 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 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
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			□Remove
			Change
			□Add
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fan effective date is listeo	er than the date of filed, the date must be specificated in this block does not date on the Department of	and cannot be prior to of meet the applicab			ling.) Purs		
ocument's effective d		not an effective tim	e, at 12:01 a.m. on	the earlier of: (b)	The 90t	h day a	fter the
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record specifies a dela d is filed.		2021	_ ·				
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