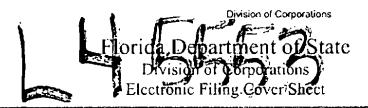
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## REGISTERED AGENT CHANGE SOUTHERN WASTE SERVICES, INC.

Certificate of Status	0
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A. BUTLER

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
I. The name of	the corporation: SOUTHERN WASTE SERVICES, INC.
	office address: 18500 NORTH ALLIED WAY, PHOENIX, AZ 85054
3. The mailing a	address (if different):
4. Date of incoη	poration/qualification: 1/26/1990 Document number: L45553
	d street address of the current registered agent and registered office on file with the timent of State: (If resigned, enter resigned)
	NRAI SERVICES, INC.
	1200 South Pine Island Road
	Plantation, Florida 33324
6. The name and (if changed):	I street address of the new registered agent (if changed) and /or registered office
	CT Corporation System Fig. 2
	1200 South Pine Island Road
	P.O. Box NOT acceptable
	Plantation, Florida 33324
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by the	is authorized by resolution duly adopted by its board of directors or by an officer so ite board, or the corporation has been notified in writing of the change.
Min	Lauren McKeon, Secretary
	e of an officer or director Printed or typed name and title
l hereby accept l further agree ( of my duties, and document is beli corporation has CT Corporation	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance d Lam familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address. Thereby confirm that the been notified in writing of this change.  System
wet!	9/7/2022
$\mathcal{O}^{-1}$	nalf of an entity:
Eric Carlso	n, Assistant Secretary
	ped or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

By: