

MOZ000000332

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

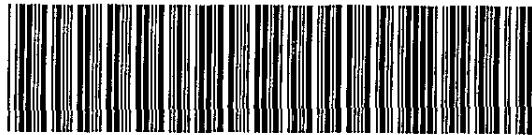
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Invisible Waste Services LLC
(Name of corporation)

DOCUMENT NUMBER: M 02000000332

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph P. Maier
(Name of person)

Cascade Engineering Inc.
(Name of firm/company)

5251 - 36th Street SE
(Address)

Grand Rapids, MI 49512-2011
(City/state and zip code)

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DIVISION OF CORPORATIONS
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For further information concerning this matter, please call:

Joseph P. Maier
(Name of person)

at (616) 975-4923
(Area code & daytime telephone number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 4, 2004

JOSEPH P. MAIER
CASCADE ENGINEERING INC.
5251 36TH STREET SE
GRAND RAPIDS, MI 49512-2011

SUBJECT: INVISIBLE WASTE SERVICES LLC
Ref. Number: M02000000332

We have received your document for INVISIBLE WASTE SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is an LLC. Enclosed is the proper form for your LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 104A00007586

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limited liability company is: Invisible Waste Services
2. The mailing address of the limited liability company is: 7112 Old Cheney Hwy
Orlando, FL 32807

02/05/02
3. Date of filing/registration in Florida

M02000000332
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CT Corporation System
Name
1200 South Pine Island Road
Address
Plantation, FL 33324
City, State and Zip

6. The name and address of the new registered agent and/or office:

Max Hunsicker
Name
9218 Northlake Pky #105
Florida street address (P.O. Box NOT acceptable)
Orlando, FL 32827
City, State and Zip

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Joseph P Maier
(Signature of member or authorized representative of a member)

Joseph P Maier
(Printed or typed name of signer)

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 608, 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.

Joseph P Maier
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314