(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



100300869781

07/05/17--01007--002 ++25.00

17 JUL -5 AM 11:49

JUL 1 11 2017 YSULKER



CORPORATE

When you need ACCESS to the world

ACCESS,

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

7-5-17

WALK IN

PICK UP:

		CERTIFIED COPY	
	A	РНОТОСОРУ	
		CUS	
	A	FILING	Amend
1.		valet Waste	ILC
		(CORPORATE NAME AND DOCUMENT	#)
2.		(CORPORATE NAME AND DOCUMENT	**)
3.			
,,,		(CORPORATE NAME AND DOCUMENT	#)
1.			
		(CORPORATE NAME AND DOCUMENT	#)
5.		(CORPORATE NAME AND DOCUMENT	")
ś.			
- •		(CORPORATE NAME AND DOCUMENT	#)
	CIA		
110	1 KU	CTIONS:	



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2017

CORPORATE ACCESS, INC.

Corrected

SUBJECT: VALET WASTE, LLC Ref. Number: M06000000387

We have received your document for VALET WASTE, 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):

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 617A00013608

11 JUL -7 AMII1 18

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of		
State: VALET WASTE, LLC		
Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
2. The Florida document number of this limited liability company is: M0600000387		
3. Jurisdiction of its organization: DELAWARE		
4. Date authorized to do business in Florida: 01/24/2006 SECTION II (5-9 complete only the applicable changes) VALETTIVING LIC		
SECTION II (5-9 complete only the applicable changes)		
5. New name of the limited liability company: VALET LIVING, LLC (must contain "Limited Liability Company, " "L.L.C.," or "L.L.C.)		
(must contain "Limited Liability Company, " "L.L.C.," or "LLC."		
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "L.L.C.")	1e	
6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address: Enter Florida Street Address		
, Florida, 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 we 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 limite	,	

If Changing Registered Agent, Signature of New Registered Agent

liability company has been notified in writing of this change.

e/ Capacity	<u>Name</u>	Address	Type of Acti
			Add
			Add
			Remo
	 		
			SSE-GG
			ORIGINA ORIGINA
			Remov
			Add
			Remov

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF AMENDMENT OF "VALET WASTE, LLC",

CHANGING ITS NAME FROM "VALET WASTE, LLC" TO "VALET LIVING,

LLC", FILED IN THIS OFFICE ON THE TWENTY-THIRD DAY OF MAY, A.D.

2017, AT 8:10 O'CLOCK A.M.



Authentication: 202827824

4098484 8100 SR# 20175086297

Date: 07-05-17

State of Delaware
Secretary of State
Division of Corporations
Delivered 08:10 AM 05 23 2017
FILED 08:40 AM 05 23 2017
SR 20173878870 - File Number 4098484

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF FORMATION OF VALET WASTE, LLC

May 23, 2017

The undersigned, for the purpose of amending the Certificate of Formation of Valet Waste, LLC, pursuant to Section 18-202 of the Limited Liability Company Act of the State of Delaware (the "Act"), does hereby certify as follows:

- 1. The name of the limited liability company is Valet Waste, LLC.
- 2. Article 1 of the Certificate of Formation of the limited liability company is hereby amended as follows: "The name of the limited liability company is: Valet Living, LLC."

[REMAINDER OF PAGE INTENTIONALLY LEFT BLANK]

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Amendment to the Certificate of Formation of Valet Waste, LLC as of the date first written above.

MEMBER:

VALET WASTE HOLDINGS, INC.

Ву:

Name: Shawn Handrahan

Title: President and Chief Executive Officer