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(((H070001857343)))



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To:

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From:

Actount Name

: ROGERS, TOWERS, BAILEY, ET AL

Account Number : 076666002273

Phone

: (904)398-3911

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REGISTERED AGENT CHANGE

NASSAU COUNTY LANDFILL, LLC

Certificate of Status	0	
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No. 0848____P__5

H07000185734

STATEMENT OF	CHANGE OF REG BOTH FOR LIM			ered agent of	*
Pursuant to the provisk liability company submit agent, or both, in the Sta	is the following state	416 or 608.508, ement in order to	Florida Statutes, i change its registe	the undersigned literated office or register	mited tered
1. The name of the limit	ed liability company	is: Nassau Cour	nty Landfill, LLC		
2. The mailing address of	of the limited liability	company is : 90	95 Gate Parkwa	y North, Suite 200) <u>. </u>
Jacksonville, Floride	32246				
February 10, 2006	-		M060000000794		
3. Date of filing/registra	tion in Florida	-	. Document numb	st.	
5. The name of the regist Florida Department of	zred agent and the re	gistered office ad	dress as shown on	the records of the	
Floring Debarmette of	Michael A. V	Vod nich			
	4304 Phys. 15	Name	4500		
	1301 Riverpla	Address	1500		DIVISI
	Jacksonville; Florida 32207				J. ISIN
	Clt	y, State and Zip			JUL 21
5. The name and address	of the new registered	l agent and/or off	lce:		JUL 20
	Walter H. Ha	di. Jr.			CORPORATIONS O AM 8: 43
		Name			ORAT ORAT
	9995 Gate Parkway North, Suite 200 Florida street address (P.O. Box NOT acceptable)			: 43	
	Florida street 24dn	ess (P.O. Hox NC	FI acceptable)		ωz
	Jacksonville	FL 32246	· · · · · · · · · · · · · · · · · · ·		
	City,	State and Zip		·· ····	•
If the limited liability con confirmed that after the cl and the business office of liability company, it is hat of the members of the lim or the operating agreemen	hange or changes are the registered agent reby confirmed that it nited liability compan at of the limited liabil	made, the Floridi will be identical, he obange(s) was ny or as otherwise ity company.	a street address of i Or, in the case of : /were authorized b	the registered office a Florida limited v en affirmativa voi	ta
(Signature of a filmber of outlook	and representative of a main	iber)	•		
(Printed or typed name of signese)		VC			
I hereby accept the appoint comply with the provisions and I am familiar with apa Chapter 508, F.S. Or, if the address. Like they confirm	niment as registered s of all statutes relati f accept the obligations his document is being that the limited liabil	agent and agree ve to the proper of ms of my position of filed to merely r lity company has	to act in this capac und complete perfo as registered agen effect a change in t been notified in wr	ity. I further agree rmance of my dutie it as provided for it the registered office tting of this change	to s, t
(Signature of Regulated Agent)				•	
Division	n of Corporations, P	.O. Box 6327, To	illahassee, FL 32	314	

INH818 (8/05)