

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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RECEIVED  
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LLC REGISTERED AGENT CHANGE  
EVERMORE RECYCLING LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$25.00 |

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Corporate Filing Menu

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EXAMINER

11/14/2012

**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. Name of the limited liability company: Evermore Recycling LLC
2. (a) Principal office address of limited liability company: 25 Century Blvd  
One Lakeview Place, Suite 600  
Nashville, TN 37214  
(Note: **MUST BE STREET ADDRESS**)  
(b) Mailing address of limited liability company: 3560 Lenox Road  
Suite 2000  
Atlanta, GA 30326  
(Note: **MAY BE POST OFFICE BOX**)  
10-20-2009 M09000004155
3. Date of filing/registration in Florida
4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
Registered Agent: Corporation Service Company  
Registered Office Address: 1201 Hays Street  
Tallahassee, FL 32301-2525  
(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
NEW Registered Agent: C T Corporation System  
NEW Registered Office Address: 1200 South Pine Island Road  
(MUST BE FLORIDA STREET ADDRESS) Plantation, FL 33324

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.

Diane B. Thumma  
Signature of a member or authorized representative of a member.

Diane B. Thumma, Member  
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.

By: Curt Kreisel  
Signature of Registered Agent

Curt Kreisel, Asst. Sec.  
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00

INFS18 (05/08)

FLA15 - 1/16/2010 C T System Online