

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: September 26, 2019

Order#: 911313-096

Re: CLEAN EARTH OF GEORGIA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

(a)	5815 Highway 17 N	(b)	
` /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Kingsland, GA 31548		
	07/25/2012	M12	2000004219
	Date of filing/registration in Florida	4.	Document number
(a)	C T Corporation System		
` ,	Registered Agent and Registered Office shown on the records of	Ethe Florida Dept.	of State;
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREET	'ADDRESS)	<u></u>
			MISSER 30 PM 1: 10
			—
	Plantation	L_33324	
			\$\frac{1}{2}\frac{1}{2
(b) _	Corporation Service Company		P.
	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee . Fi	լ 32301	
char nt w s/we	mited liability company is not organized under the lange or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited I reauthorized by an affirmative vote of the members cless of organization or the operating agreement of the	f the registered iability compan of the limited li imited liabilit	office and the business office of the registery, it is hereby confirmed that the change(s) ability company or as otherwise provided in
ignati	ure of a member or authorized representative of a member		Printed or typed name of signec
ereb visic obli nere iñed	y secept the appointment as registered agent and ag ins of all statutes relative to the proper and complete gations of my position as registered agent as provide ty reflect a change in the registered office address. I in writing of this change	ree to act in this e performance o ed for in Chapte hereby confirm	s capacity. I further agree to comply with to if my duties, and I am familiar with and acco or 605, F.S. Or, if this document is being filo that the limited liability company has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00