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DEPARTMENT OF STATE

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CORPORATION SERVICE COMPANY: ACCOUNT NO. : I20000000195

REFERENCE : 718752

4304512

AUTHORIZATION (

COST LIMIT

ORDER DATE : July 9, 2013

ORDER TIME : 2:27 PM

ORDER NO. : 718752-020

CUSTOMER NO: 4304512

CHANGE OF AGENT

NAME: BIORECLAMATION, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

## 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: Bioreclamation,	LLC	
<ol> <li>(a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)</li> </ol>	ny: 2921 W. Broward Blvd. Fort Lauderdale, FL 33311	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2921 W. Broward Blvd. Fort Lauderdale, FL 33311	<u> </u>
04/03/2013	M13000002108	
3. Date of filing/registration in Florida	4. Document number	0 2
5. (a) Registered Agent and Registered Office shown on	the records of the Florida De	
Registered Agent:	CT Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Corporation Service Compan	_
<del></del>	Corporation Service Company  1201 Hays Street	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		
	Tallahassee	.FL c/o Corporat
If the limited liability company is not organized under the loonfirmed that after the change or changes are made, the Fland the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwishe operating agreement of the limited liability company.	lorida street address of the re ical. Or, in the case of a Flor was/were authorized by an a	gistered office rida limited affirmative vote of
Signature of a member or authorized representative of a member	_	
Robert C. Dunn Printed or typed name of signee	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provisions of all statutes relative to the province of th		
Division of Corporations, P.O. Box 63.	•	,
FILING FEE: S		

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