

195000000107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

• **TO:** Registration Section
Division of Corporations

SUBJECT: Auto Shred Recycling, L.L.C.
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Lynn Burns
Name of Person

Southern Recycling, L.L.C.
Firm/Company

902 Julia St.
Address

New Orleans, LA 70113
City/State and Zip Code

mburns@sorec-emr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Lynn Burns at (504) 636-7225
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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: Auto Shred Recycling, L.L.C.

2. (a) Principal office address of limited liability company: _____



(Note: MUST BE STREET ADDRESS)

1000 South Myrick Street
Pensacola, FL 32505

(b) Mailing address of limited liability company: _____



(Note: MAY BE POST OFFICE BOX)

902 Julia Street
New Orleans, LA 70113

1/26/1995

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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:

CFRA, LLC

Registered Office Address:

Corporation Center Three at Int'l Plaza
4221 W. Boy Scout Blvd., 10th Floor
Tampa, FL 33607-5736 US

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address

NEW Registered Agent:

Marc Jaffe

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

Southern Recycling, L.L.C.
1000 South Myrick St.
Pensacola

FL 32505

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.


Signature of a member or authorized representative of a member

Joel Dupre

Printed or typed name of signee

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.


Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00