

Electronic Filing Menu Corporate Filing Menu

Help



rsua mit: pride	int to the provisions of sections 605.0114 or 605.0 s the following statement in order to change its a	116, Florida registered (i Statutes, office_or_	the undersigned limited liability comparent registered agent, or both, in the State	
Na	me of the limited liability company: Resource Rec	yeling, L.L.C.			
(a)	3636 S I-10 Service Rd., W. Ste. 101 Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>) Metairie, LA 70001		(b) <u>3636 S I-10 Service Rd.</u> , W, Ste. 101		
			Mailing address of limited liability company (<u>Note: MAY RE POST OFFICE BOX</u>) Metairic, LA 70001		
	Date of filing/registration in Florida	4.		Document number	
(a)	LENSMYER, WILLIAM				
(4)	Registered Agent and Registered Office shown on the record 10689 Harborside Dr.	is of the Florida	Dept. of St	12	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
•	Largo,	, FL_33773			
	C T Corporation System		S F		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			- 1	
	NEW Registered Office Address:		_		
	1200 South Pine Island Road		_		
	Plantation	FL			
ocha ent v s/wo	imited liability company is not organized under the inge or changes are made, the Florida street addres vill be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the membe cles of organization or the operating agreement of	s of the regis d liability co ers of the lim	stered offi mpany, it ited liabil	ee and the business office of the register is hereby confirmed that the change(s) ity company or as otherwise provided i	
	ture of a member or authorized representative of a member	Kim	Bowens	Printed or typed name of signee	

to merely reflect a change in the registered office address. Thereby confirm that the limited liability company has been notified in writing of this change. C T Corporation System Ind Themes

By:

Signature of Registered Agent Ternell Kearney Assistant Secretary

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