POID	0467	
(Requestor's Name) (Address)	400250065254	
(Address) (City/State/Zip/Phone #)	·	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	RECEIVED Profession and and 2012 SUG 23 AND TO ACKNOWLEDGE SUFFICIENCY OF FLL	
Special Instructions to Filing Officer:	AMG 23 2013	
Office Use Only	R. WHITE	



CORPORATION SERVICE COMPANY'

	ACCOUNT NO.	:	12000000195
	REFERENCE	:	
	AUTHORIZATION	:	mellenaan
	COST LIMIT	:	\$ 35.00
ORDER DATE :	August 22, 2013		
ORDER TIME :	9:15 AM		
ORDER NO. :	773929-010		
CUSTOMER NO:	4331939		

DOMESTIC AMENDMENT FILING

NAME: COUNTY WASTE, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT _____ RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER'S INITIALS:

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Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State)

COUNTY WASTE, INC.

P01000046457

(Document)	Number of Corporation (if kn	own)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, this Flo	rida Profit Corporation ado _l	ots the following amendment(s) to
A. If amending name, enter the new nam	e of the corporation:		
			The new
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Inc," or "Co'	. A professional corporation	ited" or the abbreviation on name must contain the
B. Enter new principal office address, if	applicable:		<u> </u>
(Principal office address MUST BE A STI	REET ADDRESS)		
	-	· · · · · · · · · · · · · · · · · · ·	
	-		
C. Enter new mailing address, if applica	hla-		
(Mailing address <u>MAY BE A POST OI</u>			······································
	-		<u>,</u>
	-		
D. If amending the registered agent and/	or registered office address	in Florids, enter the name	of the
new registered agent and/or the new		AT FIGT MARY CAPTER - THE MARY	<u>, 01 000</u>
Name of New Registered Agent			
Hame of New Yex Stelen Agen	· <u>·····</u> ······························		
-	(Florida street d		
-	(FIOFILIA SWEET	(ddrexs)	
New Registered Office Address:		, Florida	
	(City)		(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Page 1 of 4

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example:

X Change <u>PT</u> John Doe X Remove Y Mike Jones X Add <u>sv</u> Sally Smith Type of Action Title Name Address (Check One) PD William B. Johnson 17971 NW 13th Street Change 1) _ Pembroke Pines, FL 33029 Add х Remove OM Lauren A. Santiago 5638 Whispering Willow Way 2) ___ Change Fort Myers, FL 33908 Add Х Remove **Ashley Perkins** DPS 565 E. Hillsboro Blvd. 3) ____ Change Deerfield Beach, FL 33441 Add Remove **Brittany Perkins** DVPT 565 E. Hillsboro Blvd. 4) Change Deerfield Beach, FL 33441 Add Remove 5) ____ Change _ Add Remove 6) ____ Change Add Remove Page 2 of 4

f amending or addin Attach additional she	ng additional Arti	i <mark>cles, enter cha</mark> (Be specific)	oge(s) here:			
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f an amendment pro	ovides for an exch	ange, reclassif	ication, or cance	llation of issu	ed shares,	
provisions for imple (if not applicable	<u>ementing the amer</u> e. indicate N/A)	<u>odment if not (</u>	contained in the	amendment it	<u>self:</u>	
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date this document was signed.	, if other than the
Effective date if <u>soplicable</u> : (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
□ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dared July 20, 2013	
Signature <u>HOMOUPOLOG</u> (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Ashley Perkins	
(Typed or wristed name of nerson signing)	

(Typed or printed name of person signing)

President

L

(Title of person signing)