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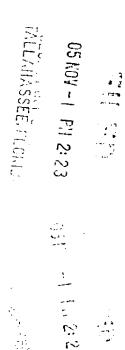
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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&A Change

6. Couliette NOV 0 1 2605

Requester's Name 3431 West 35th Street Address Rivier 2 Beach, F. 33464 (856) City/State/Zip Phone #)359-1434	ffice Use Only	
CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):			
1. Superior Services of Non (Corporation Name)	The Florida, Inc. (Document#)	PUS00014 5916	
2. (Corporation Name)	(Document #)		
_			
Corporation Name)	(Document #)		
(Corporation Name)	(Document #)		
Walk in Pick up time		Certified Copy	
		Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>		
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger		
OTHER FILINGS	REGISTRATION/QUALIFICATION		
Annual Report Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other		
		Examiner's Initials	

CR2E031(7/97)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Superior Services of North Florida, Inc
2. The principal office address: 3431 West 35th Street
Pivitera Beach, Fl. 33404
3. The mailing address (if different): P.O. Box 6005
Tallahasse, Fl. 3230
4. Date of incorporation/qualification: 10/31/05 Document number: Po 5000 14 59(6
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Philip Littles
3431 West 35th Street
Riviera Beach, Fl. 33404 All 6
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(P.O Box NOT acceptable)
West Palm Beach, FC 33401
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
(Signature of an other or director) (Signature of an other or director) (Printed or typed name and title)
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Marky (Superprised Assert) 11/1/05
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *