P24000003433

(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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FILED Aug 08, 2024 08:00 AM Secretary of State

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COVER LETTER

FILED Aug 08, 2024 08:00 AM Secretary of State

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

AME OF CORPORATION: Waste Services of MIAMI Inc
OCUMENT NUMBER: P2400000 3433
he enclosed Articles of Amendment and fee are submitted for filing.
ease return all correspondence concerning this matter to the following:
Omar Cyes to Name of Contact Person
Firm/ Company 1040 S.W 22nd Ave
Miani, Fl. 33135 City/ State and Zip Code
E-mail address: (to be used for future annul report notification)
or further information concerning this matter, please call:
Omar Cresho at 305, 993-9109 Name of Contact Person Area Code & Daytime Telephone Number
nclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

Articles of Amendment , to

Articles of Incorporation of

FILED Aug 08, 2024 08:00 AM Secretary of State

Waste Services	of Miani	Inc .	
(Name of Corporation	as currently filed with the Fi	lorida Dept. of State)	
P 240000	003433	, î	: [9
(Document	t Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	atutes, this Florida Profit Cor	rporution adopts the follow	wing amendment(s)
A. If amending name, enter the new name of the corporate	oration:		
			The new
name must be distinguishable and contain the word "corpo" Inc.," or Co.," or the designation "Corp." "Inc.," or "chartered." "professional association." or the abbrevia. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS.	r "Co". A professional cor tion "P.A." N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4	
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		ter the name of the	
	(Florida street address)		
New Registered Office Address:	(City)	, Florida(Z.	ip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an		obligations of the position	n.
N/A	e of New Registered Agent, if	· · · · · · · · · · · · · · · · · · ·	
Signatur	e of New Registered Agent, if	changing	

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

Remove

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.

X Change	PT John I	<u>Doe</u>		
X Remove	<u>V</u> <u>Mike</u>	Jones .		
X Add	SV Sally	Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<i>(</i>)	<u>Addres</u> s
1) Change	PT	Omar	Crespo	1040 S.W 22nd Au Miaui, Fl. 33135
X Add			·	MIQUI, FT. 33135
Remove				
2) Change				
Add				
Remove Change				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				

(Attach additional sheets, if necessary).	ticles, enter change(s) hero (Be specific)	•	
			•
			·
F. If an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or endment if not contained i	cancellation of issued shares, in the amendment itself:	

The date of each amendment(s) adoption: date this document was signed.	N/A	, if other than the
Effective date if applicable:	A	
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this block doe document's effective date on the Department	s not meet the applicable statutory filing requirent of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient if	the shareholders. The number of votes cast for the for approval.	amendment(s)
	the shareholders through voting groups. The following group entitled to vote separately on the amenda	
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
hy		
ℓ	voting group)	
Dated 6 18 2 Signature(X)	024	
(By a director, prosected, by an in	resident or other officer – if directors or officers han neorporator – if in the hands of a receiver, trustee, of ary by that fiduciary)	ve not been or other court
	OMOR CVESTO (Typed or printed name of person signing)	
	The control of printed name of person signing)	
	(Title of person signing)	



July 15, 2024

OMAR CRESPO 1040 S.W 22ND AVE MIAMI. FL 33135

SUBJECT: WASTE SERVICES OF MIAMI INC

Ref. Number: P24000003433

AUG 0 8 2024

We have received your document for WASTE SERVICES OF MIAMI INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 924A00015267