2/23/24, 5:04 PM

Page: 2 of 3

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From: Kaity Toon

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Account Name : C T CORPORATION SYSTEM

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REGISTERED AGENT CHANGE WHEELABRATOR RIDGE ENERGY INC.

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Electronic Filing Menu

Corporate Filing Menu



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

statement of cha	nge is submitted for a corporation	7,0502, 607,1508, or 617,1508, Florida Statute organized under the laws of the State of <mark>Delaws</mark> registered agent, or both, in the State of Florida	ne_				
1. The name of	the corporation: Wheelabrator Ridge	: Energy Inc.					
2. The principal	office address: 90 Arboretum Drive	, Suite 300, Portsmouth, NH 03801					
3. The mailing a	nddress (if different):						
4. Date of incorp	poration/qualification: 03/17/1992	Document number: P37930		_			
	d street address of the current register rtment of State; (If resigned, enter re	ered agent and registered office on file with the esigned)					
	CORPORATION SERVICE COMP	'ANY					
	1201 HAYS STREET		2024 F	ergri			
	TALLAHASSEE, FL 32301		EB 2	Section 1			
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):		2024 FEB 26 AM 10: 56					
	C T Corporation System	77	بن				
	1200 South Pine Island Road	-	σ				
	Plantation, Florida 33324	O. Box NOT acceptable					
The street addre	ess of its registered office and the s be identical.	street address of the business office of its regis	tered a	gent,			
Such change wa authorized by th	as authorized by resolution duly ad ne board, or the corporation has be	lopted by its board of directors or by an officer en notified in writing of the change.	rso				
/s/ Kara Kor		Kara Korosec, Secretary					
I hereby accept I further agree to of my duties, and document is bei	d Lam familiar with and accept th ng filed merely to reflect a change been notified in writing of this ch		1. Or 1	THus			
Sig.	nature of Registered Agent	2/22/2024 Date					
lf signing on be	half of an entity:						
Michele Holden,	Asst. Secretary						
T	ped or Printed Name						
	* * * FILEN	C. FFF: \$35.00 * * *					

FILING FEE: \$35.00

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By: