P40035

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NOV 18 2021 I ALBRITTON

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 250191 4324340

AUTHORIZATION

ORDER DATE: November 16, 2021

ORDER TIME : 8:54 AM

ORDER NO. : 250191-005

CUSTOMER NO: 4324340

CHANGE OF AGENT

NAME:

CONSOLIDATED RESOURCE

RECOVERY, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Consolidated Resource Recovery, Inc. Name of Corporation	
Name of Corporation	
DOCUMENT NUMBER:	
The enclosed Statement of Change of Registered Off	ice/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter	ter to the following:
Marc Owensby	
Name of Contact Person	 -
Consolidated Resource Recovery, Inc.	
Firm/Company	
3025 Whitfield Avenue	
Address	
Sarasota, FL 34243	
City/State and Zip Code	
marc.owensby@veransa.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this matter, please	call:
Marc Owensby	at (²⁴⁰) 899-1520
Name of Contact Person	at (240)899-1520 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Depa	rtment of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

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

statement of che	provisions of sections 607.0502 ange is submitted for a corporat	ion organized under the la	ws of the State of Del	laware
	er to change its registered office		th, in the State of Flor	ida.
1. The name of	the corporation: Consolidated R	Resource Recovery, Inc.	. <u> </u>	
2. The principal	office address: 3025 Whitfield	Avenue, Sarasota FL 3424		
3. The mailing a	nddress (if different):			
4. Date of incor	poration/qualification: 8/13/199	Document	number; P40035	
5. The name and Florida Depart	I street address of the current returnent of State: (If resigned, ent	gistered agent and registere er resigned)	ed office on file with the	he
	Gregory J. Porges			
	1205 Manatee Avenue West			2021
	Bradenton,	FL.	34205	2021 (1971 17
6. The name and (if changed):	street address of the new regist	tered agent (if changed) and	I /or registered office	17 41
	Corporation Service Compan	у		9: -
	1201 Hays Street			σ
		P.O. Box NOT acceptable		
	Tallahassee	FL	32301	
	ss of its registered office and the identical.			
Such change was authorized by th	s authorized by resolution duly e board, or the corporation has	adopted by its board of deben notified in writing o	irectors or by an office the change.	er so
حريتي	The second	Marc Owensby		
-	e of an officer or director		d or typed name and title	
of my duties, and locument is bein corporation has Corporation	the appointment as registered a comply with the provisions of I am familiar with and accept filed merely to reflect a charbeen notified in writing of this Service Company	f all statutes relative to the t the obligation of my posi uge in the registered office	his capacity. e proper and complet tion as registered ago address, I hereby co	e performance ent. Or, if this infirm that the
By: (Cleanis	White of Personal Agent	11/17/2021		
٠٠ <u>٠</u>	ature of Registered Agent nalf of an entity:		Date	
Alexxis Weilar	nd			
	ped or Printed Name			

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