P96000097999

Recycling Transport
— 19050 Glades Pd
PSLIFL 34987

UILY/ ULULU/ ZIP

700002664557--5 -10/15/98--01056--019 *****35.00 ******35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1. | | | |
|----|---------------------|--------------|--------------|
| | (Corporation Name) | (Document #) | 980 |
| 2 | (Corporation Name) | (Document #) | |
| 3. | (corporation 1 man) | (200 | TASSE OF THE |
| | (Corporation Name) | (Document #) | K. F. S. |
| 4 | (Comparation Name) | (D) | 97 2 |
| | (Corporation Name) | (Document #) | Du. |

| ☐ Walk in | Pick up time | - | Certified Copy |
|------------|--------------|-----------|-----------------------|
| ☐ Mail out | ☐ Will wait | Photocopy | Certificate of Status |

| NEW FILINGS |
|-------------------|
| Profit |
| NonProfit |
| Limited Liability |
| Domestication |
| Other |

| AMENDMENTS |
|--|
| Amendment |
| Resignation of R.A., Officer/ Director |
| Change of Registered Agent |
| Dissolution/Withdrawal |
| Merger |

| OTHER FILINGS |
|------------------|
| Annual Report |
| Fictitious Name |
| Name Reservation |

| REGISTRATION/ QUALIFICATION |
|--------------------------------|
| Foreign |
| Limited Partnership |
| Reinstatement |
| Trademark |
| Other |

QA Chg. VS 10-19-98

Examiner's Initials

Florida Department of State, Sandra B. Mortham, Secretary of State

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, the |
|--|---|
| undersigned corporation organized under the laws of the State of HONDA submits the following statement in order to change its registered office or regis. | tered agent, or both, in the |
| State of Florida | O. |
| 1. The name of the corporation is: RECYCLING TRANSPORT CORPORT | HION ON |
| | 10/10/15 |
| 2. The mailing address of the corporation is: 19050 GIADES ROPE | |
| Port St Lucie, 71 34987 | |
| 3. Date of incorporation/qualification: Dec. 4, 1996 Document num | ber: P9600009799 \$ |
| 4. The name and address of the current registered agent and office: | |
| AMERIAWYER CHARTERED | |
| 343 ALMERIA AUE | |
| 5. The name and address of the new registered agent and office: (P. O. Box Not | Acceptable) |
| John J-Wilson | • |
| 19050 Glades Road | ···· |
| Pont St Lucié, 71 34987 | |
| The street address of its registered office and the street address of the busine agent, as changed, will be identical. | ess office of its registered |
| Such change was authorized by resplution duly adopted by its board of direct authorized by the logard. | ctors or by an officer so |
| (Signature of an officer, chairman or vice chairman of the board) | (Date) |
| John J. Wilson President (Printed or typed name and title) | Oct 9, 1998 |
| Having been named as registered agent and to accept service of process for corporation, I hereby accept the appointment as registered agent and agre. I further agree to comply with the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligation registered agent. | r the above stated e to act in this capacity. roper and complete a of my position as |
| (Signature of Registered Agent) | Ot 9, 1998 |
| If signing on behalf of an entity: | |
| (Typed or Printed Name) | Capacity) |

CR2E045(4/95)

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FILING FEE: \$35.00