P97000010744



FILED 00 DEC -6 PH 5: 14

ACCOUNT NO.	:	07210000	PALLAHASSEE FLORIDA
REFERENCE	:	921038	7224934 LURIDA

AUTHORIZATION :

atricia Print

100003489411--2

COST LIMIT : \$ 35.00

ORDER DATE : December 6, 2000

ORDER TIME : 12:01 PM

ORDER NO. : 921038

CUSTOMER NO: 7224934

CUSTOMER: Mark Ellis, Corp Spec.

Synagro Technologies, Inc.

Suite 1000

1800 Bering Drive Houston, TX 77056

CHANGE OF AGENT

NAME: SYNAGRO OF FLORIDA - A&J, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

NX PLAIN STAMPED COPY

CONTACT PERSON: Mimi Stephens -- EXT# 1128

EXAMINER:

& COULLIETTE DEC 0 6 2000

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

1. The name of the corporation is: SYNAGRO OF FLORIDA - ALJ, INC. 2. The mailing address of the corporation is: 1800 Bering Drive, Suite 1000, Houston, Texas 77057 3. Date of incorporation/qualification: January 30, 1897 Document number: P97000010744 4. The name and address of the current registered agent and office: CT Corporation System 1200 South Fine Island Road Plantation, Florida 33324 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable) Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301 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. (Signature of an officer, chairman or vice chairman of the board) (Signature of an officer, chairman or vice chairman of the board) (All III Vice President (Printed or typed name and itsic) Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to each the capacity flyther 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. By: Lilloud M. School (Capacity) (Signature of Registered Agent) (Capacity)			registered office or registered agent, or both, in
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By: White of Registered Agent) If signing on behalf of an entity: DEBORAH D. SKIPPER, Assistant Vice President (Typed or Printed Name)	77		
DEBORAH D. SKIPPER, Assistant Vice President (Typed or Printed Name)	I further agree to co performance of my	as registered agent and to accept serving accept the appointment as registered mply with the provisions of all statute, luties, and I am familiar with and according to the control of the	vice of process for the above stated d agent and agree to act in this capacity. s relative to the proper and complete ept the obligation of my position as
DEBORAH D. SKIPPER, Assistant Vice President (Typed or Printed Name)	By: Delegra	s KC Skinner	1.2-5-00
DEBORAH D. SKIPPER, Assistant Vice President (Typed or Printed Name)	(Sign	ature of Registered Agent)	(Date)
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(Typed or Printed Name) (Capacity)			ing and the second of the seco
	(Тур	ed or Printed Name)	(Capacity)
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P.O. Box 6327

TALLAHASSEE, FL 32314

DIVISION OF CORPORATIONS