Parament Number Only Parament

C T Corporation System:				
Requestor's Name 660 East Jefferson Stre	et			
Address Tallahassee, FL 32301	222-1092	,,	100 <u>025</u> 24	46183
City State Zip	Phone		-08/25/98- *****35.00	-01047018] *****35.00
CORPORATION(S) NAME			
			<u> </u>)
	•			desc
	7		AHAS	E 7
Mary	Bryan Recy		SEE,	1LE 25
			FLOR	₽ D
() Profit () NonProfit	() Amendn	nent	() Meiger	Sī Sī
() Limited Liability Company () Foreign	() Dissolut	ion/Withdrawal	() Mark	UCC-3 Filing
() Limited Partnership	() Annual Report		() Other	
() Reinstatement () Limited Liability Partnersh	() Reserva	ation	Change C	us Name
() Certified Copy	() Photo C	Copies	() CUS	
() Call When Ready	() Call if P () Will Wa	roblem	() After 4:30 Pick Up)
Walk in () Mail Out	() 11 11	···		
Name Availability DO		PLFASE	RETURN EXTRA	Corx(s)
Document	8/25		file stampeī Thanks	
Updater O			CONNIE 9	25 3
Verifier W				OEIVED
Acknowledgment			FILE STAMPEL THANKS S CONNIE S	IVED PM2:10
W.P. Verifier		,	<u> </u>	É
U / 1()*L.l-a				

CR2E031 (1-89)

Florida Department of State, Jim Smith, 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 submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.					
1a. The name of the corporation is: Mary Br	yan Recycling, Inc.				
1b. Date of incorporation 08/20/97	Document number P97000072137				
2. The name and address of the current re					
200 Solana Road Road Solana Road Road Solana Road Solana Road Sola					
3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable) C T CORPORATION SYSTEM					
c/o C T CORPORATION SYSTEM, 1200 South	Pine Island Rd., Plantation Florida 33324				
The street address of its registered agent are of its registered agent as changed will be ide	d the street address of the business office				
Such change was authorized by resolution of an officer so authorized by the board. Margard June Signature Signature DATE	Margaret S. Giordano Asst. Secretary Typed or printed name and title				
HAVING BEEN NAMED AS REGISTERED A PROCESS FOR THE ABOVE STATED COR IN THIS CERTIFICATE, I HEREBY ACCEPT AGENT AND AGREE TO ACT IN THIS CAP WITH THE PROVISIONS OF ALL STATUTE PLETE PERFORMANCE OF MY DUTIES, A THE OBLIGATION OF MY POSITION AS RE	PORATION AT THE PLACE DESIGNATED THE APPOINTMENT AS REGISTERED ACITY. I FURTHER AGREE TO COMPLY S RELATIVE TO THE PROPER AND COM- ND I AM FAMILIAR WITH AND ACCEPT				

C T CORPORATION SYSTEM Jamom Hal SIGNATURE BY: XVVVVIII (Registered Agent) DATE Asst. Secy. 8/24/98

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (7-91)

FILING FEE: \$35.00

TOTAL P.02