

**2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000001051

**FILED**  
**Jun 11, 2013**  
**Secretary of State**  
**CC4851217035**

**Entity Name:** NEIE MEDICAL WASTE SERVICES, LLC

**Current Principal Place of Business:**

3100 NEW KENT HIGHWAY  
QUINTON, VA 23141

**Current Mailing Address:**

3100 NEW KENT HIGHWAY  
QUINTON, VA 23141

**FEI Number:** 26-0671867

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

NORTHWEST REGISTERED AGENT LLC  
3030 N. ROCKY POINT DRIVE, STE 150A  
TAMPA, FL 33607 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SUMNER, PATRICIA  
Address 3100 NEW KENT HIGHWAY  
City-State-Zip: QUINTON VA 23141

Title MGR  
Name FELDBUSCH, JEREMY  
Address 3100 NEW KENT HIGHWAY  
City-State-Zip: QUINTON VA 23141

Title MGR  
Name HOHMAN, DEAN  
Address 3100 NEW KENT HIGHWAY  
City-State-Zip: QUINTON VA 23141

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICIA SUMNER

**MEMBER**

**06/11/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date