

2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000006240

Entity Name: COVANTA PROJECTS, LLC**Current Principal Place of Business:**445 SOUTH ST.
MORRISTOWN, NJ 07960**Current Mailing Address:**445 SOUTH ST.
MORRISTOWN, NJ 07960**FEI Number:** 13-3213657**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:** PAOLA TADDEO ON BEHALF OF C T CORPORATION

03/16/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title EVP
Name SIMPSON, TIMOTHY J
Address 445 SOUTH ST.
City-State-Zip: MORRISTOWN NJ 07960

Title GC
Name SIMPSON, TIMOTHY J
Address 445 SOUTH ST.
City-State-Zip: MORRISTOWN NJ 07960

Title S
Name SIMPSON, TIMOTHY J
Address 445 SOUTH ST.
City-State-Zip: MORRISTOWN NJ 07960

Title EVP
Name SIMPSON, TIMOTHY J
Address 445 SOUTH ST.
City-State-Zip: MORRISTOWN NJ 07960

Title GC
Name SIMPSON, TIMOTHY J
Address 445 SOUTH ST.
City-State-Zip: MORRISTOWN NJ 07960

Title S
Name SIMPSON, TIMOTHY J
Address 445 SOUTH ST.
City-State-Zip: MORRISTOWN NJ 07960

Title VICE PRESIDENT
Name TADDEO, PAOLA
Address 445 SOUTH STREET
City-State-Zip: MORRISTOWN NJ 07960

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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAOLA TADDEO

VICE PRESIDENT

03/16/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date