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Michael G. Adams  
 Kentucky Secretary of State  
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COMMONWEALTH OF KENTUCKY  
 MICHAEL G. ADAMS, SECRETARY OF STATE

Division of Business Filings  
 P.O. Box 718  
 Frankfort, KY 40602  
 (502) 564-3490  
 www.sos.ky.gov

**Certificate of Renewal of Assumed Name**  
 (Domestic or Foreign Business Entity)

RAN

Pursuant to the provisions of KRS 365, the undersigned applies to renew an assumed name and, for that purpose, submits the following statements:

1. This certifies that the assumed name of the business entity is:

Nationwide Waste Systems

2. The assumed name is being renewed by:

Compactor Rental Systems of Delaware, Inc.

(The "real name" of entity or partners)

3. The "real name" is (you must check one):

- |                                                  |                                                           |
|--------------------------------------------------|-----------------------------------------------------------|
| a Domestic General Partnership                   | a Foreign General Partnership                             |
| a Domestic Limited Liability Partnership         | a Foreign Limited Liability Partnership                   |
| a Domestic Limited Partnership                   | a Foreign Limited Partnership                             |
| a Domestic Business Trust                        | a Foreign Business Trust                                  |
| a Domestic Corporation                           | <input checked="" type="checkbox"/> a Foreign Corporation |
| a Domestic Limited Liability Company             | a Foreign Limited Liability Company                       |
| a Domestic Statutory Trust                       | a Foreign Statutory Trust                                 |
| a Domestic Limited Cooperative Association       | a Foreign Limited Cooperative Association                 |
| a Domestic Unincorporated Non-profit Association | a Foreign Unincorporated Non-profit Association           |

4. The business entity is organized and existing in the state or country of Delaware

5. The mailing address of the business entity is:

18500 North Allied Way	Phoenix	AZ	85054
Street Address or Post Office Box Numbers	City	State	Zip

I declare under penalty of perjury under the laws of Kentucky that the forgoing is true and correct.

Signature of Authorized Party

Lauren McKeon, Secretary

Printed Name

3/7/24

Date