

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NWI Recycling, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Jeff Whitehead

	Name of Person
Whitehead & Associates	
	Firm/Company
105 W. Madison Street, Suite 900	
	Address
Chicago, Illinois 60602	
	City/State and Zip code
tdakich@dakichlaw.com; jeffwhitehead_2000@yahoo.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Thomas P. Dakich	317	9664967	
Name of Person	Area Code	Daytime Telephone Number	

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

Enclosed is a check for the following amount:

- \$70.00 Filing Fee \$78.75 Filing Fee & Certificate of Status \$78.75 Filing Fee & Certified Copy \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. NWI Recycling, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Indiana 3. 81-1934809
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March 23, 2016 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)

6. June 1, 2016
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5905 Johns Road, Tampa, Florida 33634
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Thomas D. Brunette

Office Address: 5905 Johns Road

Tampa, Florida 33634
(City) (Zip code)

FILED
16 MAY -9 AM 10:34
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further 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 obligations of my position as registered agent.

[Signature]
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Thomas D. Brunette
Address: 5905 Johns Road
Tampa, Florida 33634

Vice Chairman: Jeff Whitehead
Address: 105 W. Madison Street, Suite 900
Chicago, IL 60602

Director: Thomas P. Dakich
Address: 9425 N. Meridian Street, Suite 161
Indianapolis, Indiana 46240

Director: _____
Address: _____

B. OFFICERS

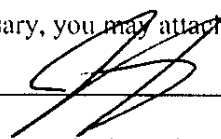
President: Thomas D. Brunette
Address: 5905 Johns Road
Tampa, Florida 33634

Vice President: Jeff Whitehead
Address: 105 W. Madison, Suite 900
Chicago, Illinois 60602

Secretary: Thomas P. Dakich
Address: 9425 N. Meridian Street, Suite 161 Indianapolis, IN 46240

Treasurer: _____
Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. JEFF WHITEHEAD
(Typed or printed name and capacity of person signing application)

RECEIVED
MAY 16 2011
STATE OF FLORIDA
DEPARTMENT OF STATE
TAMPA, FLORIDA

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

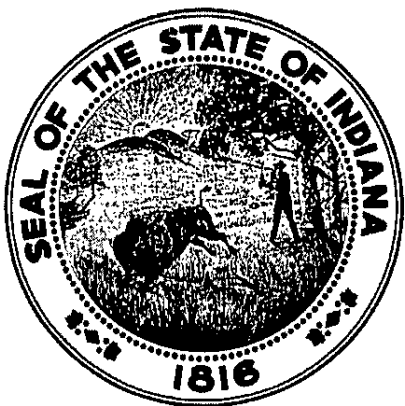
I, CONNIE LAWSON, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

NWI RECYCLING INC.

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on March 23, 2016, and was in existence or authorized to transact business in the State of Indiana on May 05, 2016.

I further certify this Domestic For-Profit Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, May 05, 2016

Connie Lawson

CONNIE LAWSON
SECRETARY OF STATE

FILED
16 MAY -9 AM 10:34
OFFICE OF STATE
CLERK
FALL AHSSETT
FLORIDA
USA

2016032300565 / 201610625

Verify this certificate: <https://bsd.sos.in.gov/ValidateCertificate>