

F170000003741

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

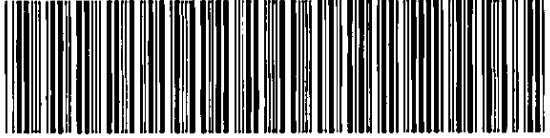
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



700296336447

RECEIVED
2017 AUG 18 PM 1:57
TALLAHASSEE, FLORIDA

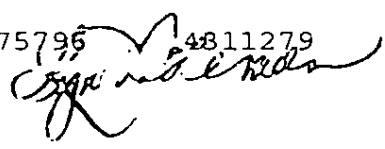
FILED
2017 AUG 18 AM 10:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
AUG 21 2017

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 775796 ✓ 4311279

AUTHORIZATION : 

COST LIMIT : \$ 70.00

ORDER DATE : August 18, 2017

ORDER TIME : 1:21 PM

ORDER NO. : 775796-005

CUSTOMER NO: 4311279

FOREIGN FILINGS

NAME: COASTAL WASTE & RECYCLING,
INC.

XXXX QUALIFICATION (TYPE: CO)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Coastal Waste & 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:
Colleen Bartini

	Name of Person
Whiteman Osterman & Hanna LLP	
	Firm/Company
1 Commerce Plaza, Suite 1900,	
	Address
Albany, NY 12260	
	City/State and Zip code
cbartini@woh.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Charles R. Haviland	518	487-7600	
Name of Person	Area Code	Daytime Telephone Number	at ()

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:

- | | | | |
|---------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------------------------------|
| <input type="checkbox"/> \$70.00 Filing Fee | <input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$78.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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.

Coastal Waste & Recycling, Inc.

1. (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)

DE

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

7/5/17

4. (Date of incorporation) 5. (Date of duration, if other than perpetual)

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

70 West Chippewa Street, Suite 500, Buffalo, New York 14202

7. (Principal office address)

70 West Chippewa Street, Suite 500, Buffalo, New York 14202

(Current mailing address, if different)

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

Name: Corporation Service Company

Office Address: 1201 Hays Street

Tallahassee, Florida 32301 (City) (Zip code)

FILED 2011 AUG 18 AM 10:07 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.

Corporation Service Company

By: (Registered agent's signature)

Melissa Zender Asst. Vice President

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: Brian D'Amico
Address: 70 West Chippewa Street, Suite 500, Buffalo, New York 14202

Vice Chairman: _____
Address: _____

Director: _____
Address: _____

Director: Michael J. Petri
Address: 70 West Chippewa Street, Suite 500, Buffalo, New York 14202

B. OFFICERS

President: Brendon Pantano, Chief Executive Officer
Address: 70 West Chippewa Street, Suite 500, Buffalo, New York 14202

Vice President: _____
Address: _____

Secretary: Christian Gorino
Address: 70 West Chippewa Street, Suite 500, Buffalo, New York 14202

Treasurer: Michael J. Petri
Address: 70 West Chippewa Street, Suite 500, Buffalo, New York 14202

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. Michael J. Petri, Treasurer
(Typed or printed name and capacity of person signing application)

FILED
2017 AUG 18 AM 10:07
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COASTAL WASTE & RECYCLING, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COASTAL WASTE & RECYCLING, INC." WAS INCORPORATED ON THE FIFTH DAY OF JULY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.

FILED
2017 AUG 18 AM 10:07
SECRETARY OF STATE
JAMES H. HARRIS, JR.
DELAWARE




Jeffrey W. Bullock, Secretary of State

6467773 8300

SR# 20175788165

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203081959

Date: 08-18-17