

F05 0000000632

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

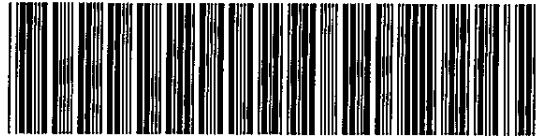
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 FEB -3 PM 2:13
TALLAHASSEE FLORIDA
FILED
05 FEB -3 PM 11:22
TALLAHASSEE FLORIDA

CT CORPORATION

February 3, 2005

Department of State, Florida
409 East Gaines Street
Tallahassee FL 32399

FILED
05 FEB -3 PM 2:13
STATE
TALLAHASSEE, FLORIDA

Re: Order #: 6294349 SO
Customer Reference 1:
Customer Reference 2:

Dear Department of State, Florida:

Please obtain the following:

AWIN Management, Inc. (DE)
Qualification
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Ashley A Mitchell
Fulfillment Specialist
Ashley_Mitchell@cch-lis.com

660 East Jefferson Street
Tallahassee FL 32301
Tel 850 222 1092
Fax 850 222 7615

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

FILED
FEB-3 PM 2:13
TALLAHASSEE, 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. AWIN MANAGEMENT, 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. Delaware 3. 76-0353318
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 09/25/1991 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. 01/01/2005
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 15880 N Greenway-Hayden Loop, Suite 100, Scottsdale, AZ 85260
(Principal office address)

same
(Current mailing address)

8. non-hazardous solid waste management
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

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

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

10. 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.

C T Corporation System

Maria Ozaeta
Vice President

By: Maria Ozaeta
(Registered agent's signature)

11. 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.

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

A. DIRECTORS

Chairman: SEE ATTACHMENT

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: SEE ATTACHMENT

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. Jo White
(Signature of Director or Officer listed in number 12 of the application)

14. Jo Lynn White, Secretary
(Typed or printed name and capacity of person signing application)

AWIN Management, Inc.

Directors

Donald W. Slager

Director

Primary Address: 15880 N. Greenway Hayden Loop, Suite 100
Scottsdale, AZ 85260 (United States)

James Edward Gray

Director

Primary Address: 15880 N. Greenway Hayden Loop, Suite 100
Scottsdale, AZ 85260 (United States)

Thomas Patrick Martin

Director

Primary Address: 15880 N. Greenway Hayden Loop, Suite 100
Scottsdale, AZ 85260 (United States)

Officers

Steven M. Helm

Vice President

Primary Address: 15880 N. Greenway Hayden Loop, Suite 100
Scottsdale, Arizona 85260 (United States)

Dale Leon Parker

Vice President

Primary Address: 15880 N. Greenway-Hayden Loop, Suite 100
Scottsdale, AZ 85260 (United States)

Donald W. Slager

President

Primary Address: 15880 N. Greenway Hayden Loop, Suite 100
Scottsdale, AZ 85260 (United States)

Connie J. Gecich

Assistant Secretary

Primary Address: 15880 N. Greenway Hayden Loop, Suite 100
Scottsdale, Arizona 85260 (United States)

Thomas Patrick Martin

Treasurer

Primary Address: 15880 N. Greenway Hayden Loop, Suite 100
Scottsdale, AZ 85260 (United States)

Jo Lynn White

Secretary

Primary Address: 15880 N. Greenway Hayden Loop, Suite 100
Scottsdale, AZ 85260 (United States)

Delaware

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The First State

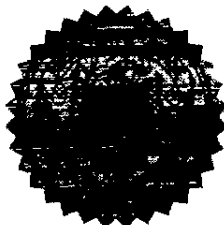
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "AWIN MANAGEMENT, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF FEBRUARY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

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

2274651 8300

050082852



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3656131

DATE: 02-01-05