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DATE:

06-13-08

NAME:

CARIB RECYCLING LP

TYPE OF FILING: APPLICATION FOR LP

COST:

**CK FOR \$1,052.50 ATTACHED** 

RETURN: CERT. COPY

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINES IN FLORIDA

1. Carib Recycling, LP	· · · · · · · · · · · · · · · · · · ·
Acceptable Limited Partnership suffixes: Lin	d Liability Limited Partnership, which must include suffix) nited Partnership, Limited, L.P., LP, or Ltd. ship suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.	5.00 t 400 to 100 to 10
•	
(If name unavailable, name under which t proposes to register to transact b	he limited partnership or limited liability limited partnership usiness in Florida; must contain acceptable suffix.)
2. Delaware	<sub>3.</sub> June 5, 2008
(State or Country of Formation)	(Date of Formation)
4. Capitol Corporate Service	es, Inc.
(Name of Regist	ered Agent for Service of Process)
5, 155 Office Plaza Dr. STE	A, Tallahassee FL 32301
(Florida stree	t address for Registered Agent)
	tered agent and agree to act in this capacity. I further agree to ative to the proper and complete performance of my duties, ons of my position as registered agent.
****	nu Case, asst. see.
7. 8050 Northwest 74th Avenu	ue. Miami. FL 33166
· · · · · · · · · · · · · · · · · · ·	incipal office address)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
· ·	
8. II limited partnership is a limited l	iability limited partnership, check box

9. 8050 Northwest 74th Avenue, Miami, FL 33166 (Mailing address)				
10. Name, principal office address, and mailing address of each general partner:				
Islands GP, LLC	8050 Northwest 74th Avenue			
	Miami, FL 33166			
(Name) MOX (100 X) 277V	same as street address			
	(Mailing Address)			
(Name)	(Street Address)			
	(Mailing Address)			
(Name)	(Street Address)			
	(Mailing Address)			
(Name)	(Street Address)			
	(Mailing Address)			

Page 2 of 3

(Name)		(Street Address)
		(Mailing Address)
(Name)		(Street Address)
		(Mailing Address)
11. Effective date, if other than the date of	filing:	
(Effective date cannot be prior to no filed by the Florida Department of .	•	after the date this document is
12. Attached is a certificate of exist to the delivery of this application to State or other official having custoclaw of which it is organized.	the Florida Departm	ent of State, by the Secretary of
Signed this 5th day	of June	, <sub>20</sub> <u>08</u> .
Signature of a general partner.  Lisland GP, LLC  By: Wayne Mathis  Title: Manager of LLC		
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	<b>\$1,000.00</b> (\$965 Fili <b>\$52.50</b> <b>\$8.75</b>	ng Fee and \$35 Registered Agent Fee)

# Delaware

DACE

### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CARIB RECYCLING, LP" IS DULY PORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF JUNE, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CARIB RECYCLING, LP" WAS FORMED ON THE FIFTH DAY OF JUNE, A.D. 2008.

AND I DO HERBBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

**45**57358 8300

080682404
You may verify this certificate online at corp. dalamare.gov/authwer.shtml

Darriet Smith Hinden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6651280

DATE: 06-11-08