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WILL OF CORPORATIONS ALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO:	Registration S Division of Co							
SUBJ	ECT:	p. c.	FORM	REC	YCLE,	INC	• •	
					include suffix		·	
Dear S	ir or Madam:							
"Certif	closed "Applicate of Existen t business in Flo	ntion by Foreign oce," and check arorida.	Corporation for e submitted to	or Authoriz o register th	ation to Trans ne above refere	act Business i enced foreign	in Florida," corporation to	
Please	return all corres	spondence concer	ning this matt	ter to the fo	ollowing:			
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	(Name of Per	son)	(Are	a code & 1	zaytime reiep	none Numbei	7)	
	STREET AD Registration S Division of Co 409 E. Gaines Tallahassee, F.	ection orporations St.	· /. ·	-	MAILING A Registration Division of C P.O. Box 632 Tallahassee,	Section Corporations 27		·
Enclos	ed is a check for	r the following ar	nount:	-			ty	٠,
□ \$70	.00 Filing Fee	\$78.75 Fili Certificate	ng Fee & e of Status		Filing Fee & ed Copy	Certif	Filing Fee, icate of Status & ied Copy	;
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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. D. C. FORM RECYCLE, INCORPORATED (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 MARYLAND

(State or country under the law of which it is incorporated)

(FEI number, if applicable) 4. 6/28/93
5. PERPETUAL 5. (Duration: Year corp. will cease to exist or "perpetual" 4/1/04 (Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) 3761 COMMERCE OR STE 406 BALTIMORE, MO 2122:
(Principal office address) (Current mailing address) 8. COLLECTION DF POST-CONSUMER FLEXIBLE FORM FOR 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: SSOS STEEPLE CHASE

BOCK RATON , Florida 33496

(City) (Zip code) Office Address: 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.

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.

(Registered agent's signature)

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

A. DIRECTORS

Chairman:	LOUIS RENGAIN	
Address:	11857 LINDER CHAPEL AS	
	CURKSVILLE, MD 21029	
Vice Chairman: _	ALAN TABACKMIN	
Address:	8521 HIGH TIMBER CT	
*****	ELLICOIT CITY, MD 21043	
Director:		

Director:		
		於 27 下
B. OFFICERS		SARP R
	LOUIS RENBAUM	PH 2: 0 PRPORA EE, FLOR
Address:	11857 LINDEN CHAPEL RD	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8
	CLARKSVILLE, MD 21029	
Vice President:	ALAN TABACKMAN	
Address:	8521 HIGH TIMBER CT	
, -	ELLICOTT CITY, MD 21043	
Secretary:		
Address:		
Treasurer:		
Address:		
	sary, you may attach an addendum to the application listing additional officers and	
13	modellulion	<u></u>
	(Signature of Director or Officer listed in number 12 of the application)	
14.	(Typed or printed name and capacity of person signing application)	n
	(1 y pou of primiou maine and capacity of Deison Signing addition)	

STATE OF MARYLAND Department of Assessments and Taxation

I, PAUL B. ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO CORPORATIONS OR THE RIGHTS OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT ACCORDING TO THE RECORDS OF THIS DEPARTMENT D.C. FOAM RECYCLE INCORPORATED FILED ITS ARTICLES OF INCORPORATION, WHICH HAVING BEEN RECEIVED AND APPROVED FOR RECORD BY THIS DEPARTMENT ON JUNE 28, 1993.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS DECEMBER 10, 2004.

Paul B. Anderson Charter Division PILED

2004 DEC 27 PM 2: 08

11 ON CE CORPORATIONS

11 AHASSEE, FLORIDA



301 West Preston Street, Baltimore, Maryland 21201
Telephone Balto. Metro (410) 767-1344 / Outside Balto. Metro (888) 246-5941
MRS (Maryland Relay Service) (800) 735-2258 TT/Voice
Fax (410)333-7097

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