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| PICK-UP WAIT | MAIL | | | |
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| Certified Copies Certificat | es of Status | | | |
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| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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EXAMINER

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | | |
|---|--|--|--|--|--|
| SUBJECT: GREENWAY TIRE RECYCLING IN C. Name of Corporation | | | | | |
| DOCUMENT NUMBER: F 12-000000 (12- | | | | | |
| The enclosed Articles of Correction and fee | are submitted for filing. | | | | |
| Please return all correspondence concerning this matter to the following: | | | | | |
| Name of Contact Person | | | | | |
| GREENWAY TIME RECYCLING | | | | | |
| 3810 DRAWE FIEL | 0 RO. | | | | |
| LAKE LAND PROJECTION City/State and Mp Code | . 33811 | | | | |
| E-mail address: (to be used for future annual report notification) | | | | | |
| For further information concerning this mat | ter, please call: | | | | |
| Name of Contact Person | at (S63) 644 - 733 6 Area Code & Daytime Telephone Number | | | | |
| Enclosed is a check for the following amount: | | | | | |
| □ \$35.00 Filing Fee | \$\square\$ \$43.75 Filing Fee & Certificate of Status | | | | |
| \$43.75 Filing Fee & Certified Copy | \$52.50 Filing Fee, Certificate of Status & Certified Copy | | | | |
| Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | | |

| ARTICLES OF CORRECTION |
|--|
| for |
| CARRAWA! TIME RECYCLING INC. |
| F 12 000 000 112 Document Number (if known) |
| Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected. |
| These articles of correction correct FONTIGN PURITY CORPORATION (Document Type Being Corrected) |
| filed with the Department of State on(File Date of Document) |
| Specify the inaccuracy, incorrect statement, or defect: |
| PLEASE COMFET THE LIVIED GAP. OFFICER. |
| AS LISTED BELOW PEN THE STITETED NEVADA |
| CAPP. FILING. THE 2 TO BE REMOVED WERE |
| LISTED IN ERROR |
| Correct the inaccuracy, incorrect statement, or defect: AS POLLUMI; JEFFREYCHARNER - CP TEFFREY CHARNER - DS KEN LOWMAN - VCVP KEN LOWMAN - DS |
| ADDRESSES STAY SAME. |
| (Signature of A director, president or other officer - if directors or officers have not been safected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.) |
| (Typed or printed name of person signing) (Title of person signing) |

Filing Fee: \$35.00

(PHOFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF: FILE NUMBER GREENWAY TIRE RECYCLING INC E0148862011-6 NAME OF CORPORATION FOR THE FILING PERIOD OF 3/2012 TO 3/2013 **YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov** The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is THE CORPORATION TRUST COMPANY OF NEVADA (Commercial Filed in the office of Document Number Registered Agent) 20120036395-81 · La Ma 311 S DIVISION ST Filing Date and Time CARSON CITY, NV 89703 USA Ross Miller 01/19/2012 10:01 AM Secretary of State **Entity Number** State of Nevada E0148862011-6 A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.rivsos.gov (This document was filled electronically) USE BLACK INK ONLY - DO NOT HIGHLIGHT Return one file stamped copy. (It filing not accompanied by order instructions, file stamped copy will be sent to registered agent.) IMPORTANT: Read instructions before completing and returning this form. 1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED. 2. If there are additional officers, attach a list of them to this form. 3. Return the complete form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A \$75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for 4. State husiness ticense fee is \$200.00. Effective 2/1/2010. \$100.00 must be added for failure to file form by deadline 5. Make your check payable to the Secretary of State. 6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional \$30.00 per certification. A copy fee of \$2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must 7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708. 6. Form must be in the passession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filling. CHECK ONLY IF APPLICABLE Section 7(2) Exemption Codes 001 - Governmental Entity Pursuant to NRS, this corporation is exempt from the business license lee. Exemption code: 002 - 501(c) Nonprofit Entity Month and year your State Business License expires: 003 - Home-based Business - Natural Person with 4 or less This corporation is a publicly traded corporation. The Central Index Key number is: rental dwelling units 005 - Motion Picture Company 006 - NRS 680B.020 Insurance Co. This publicly traded corporation is not required to have a Central Index Key number. TITLE(S) NAME JEFF CHARTIER PRESIDENT (OR EQUIVALENT OF) ZIP CODE CITY STATE ADDRESS LAKELAND FL 3810 DRANE FIELD RD #21 33811 TITLE(S) NAME SECRETARY (OR EQUIVALENT OF) JEFFREY S CHARTIER CITY ADDRESS ZIP CODE LAKELAND 33811 3810 DRANE FIELD RD #21 TITLE(8) KEN LOWMAN TREASURER (OR EQUIVALENT OF) CITY ZIP CODE **ADDRESS** STATE LAKELAND FŁ 33811 3810 DRANE FIELD RD #21 NAME TITLE(S) KEN LOWMAN DIRECTOR **ADDRESS** CITY ZIP CODE LAKELAND 33811 3810 DRANE FIELD RD #21 ge under penalty of perjury, that the above mentioned entity has compiled with the provisions of sections 6 to 18 of AB 145 of glalature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowlingly offer any false or forged session of the Neveda int forfilling in the Offic JEFF S CHARMER PRESIDENT 1/19/2012 9:59:47 AM

e of Officer

Nevada Secretary of State Annual List Profit Revised: 8-5-09 SECRETARY OF STATE



NEVADA STATE BUSINESS LICENSE

GREENWAY TIRE RECYCLING INC

Nevada Business Identification # NV20111180087

Expiration Date: March 31, 2013

In accordance with Title 7 of Nevada Revised Statutes, pursuant to proper application duly filed and payment of appropriate prescribed fees, the above named is hereby granted a Nevada State Business License for business activities conducted within the State of Nevada.

This license shall be considered valid until the expiration date listed above unless suspended or revoked in accordance with Title 7 of Nevada Revised Statutes.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on January 19, 2012

ROSS MILLER Secretary of State

This document is not transferable and is not issued in lieu of any locally-required business license, permit or registration.

Please Post in a Conspicuous Location

You may verify this Nevada State Business License online at www.nvsos.gov under the Nevada Business Search.

STATE OF NEVADA



SCOTT W. ANDERSON

Deputy Secretary for Commercial Recordings



Commercial Recordings Division

202 N. Carson Street Carson City, NV 89701-4069 Telephone (775) 684-5708 Fax (775) 684-7138

Stephanie Lee 1010 Seminole Dr # 1203 Fort Lauderdale, Florida 33304

Job:C20120119-0866 January 19, 2012

Special Handling Instructions:

Charges

| Description | Document Number | Filing Date/Time | Qty | Price | Amount |
|------------------------------------|-----------------|-----------------------|-----|----------|----------|
| Annual List | 20120036395-81 | 1/19/2012 10:01:56 AM | 1 | \$175.00 | \$175.00 |
| Business License 3/2012- 3/2013 | 20120036395-81 | 1/19/2012 10:01:56 AM | 1 | \$200.00 | \$200.00 |
| Total | | | | | \$375.00 |

Payments

| Туре | Description | Amount |
|--------|-----------------------|----------|
| Credit | 224157 12011925789379 | \$375.00 |
| Total | | \$375.00 |

Credit Balance: \$0.00

Job Contents:

File Stamped Copy(s): Business License(s): 1

Stephanie Lee 1010 Seminole Dr # 1203 Fort Lauderdale, Florida 33304