

Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom

of all pages of the document.

(((H01000031323 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet,

To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : FOLEY & LARDNER

Account Number : 072720000061 Phone : (904)359-2000

Fax Number : (904)359-8700

\$-0 ma

OL MAR 28 PM 1: SECHETAGE OF STA TALLAHASSEE, FLOOR

LIMITED LIABILITY COMPANY

GATEWAY DISPOSAL SERVICES LLC

MAR 28 ph12:31

Certificate of Status	0
Certified Copy	1
Page Count	01

NO.944 P.2

Page 2 of

Estimated Charge \$155.00

Estimated Charge \$155.00

Estimated Charge \$155.00

OI MAR 28 PM 4: 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Gateway Disposal Services LLC
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company are: 9798 Normandy Boulevard, Jacksonville, Florida 32221 ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature: The name and the Florida street address of the registered agent are: ROBERT L. CRAWFORD Name
ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
ROBERT L. CRAWFORD
Name South Control of the Control of
9798 NORMANDY BOULEVARD
Florida street address (P.O. Box NOT acceptable)
JACKSONVILLE, FL 32221
City, State, and Zip
Flaving been named as registered agent and to accept service of process for the above stated limited Hability company at the place designated in this certificate, 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 relating to the proper and completed performance of may duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Robert L. Crawford
Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.
(An additional article must be added if an effective date is requested) Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

FILING FEEES:
\$100.00 Filing Fee for Articles of Organization
\$25.00 Designation of Registered Agent
\$30.00 Certified Copy (OPTIONAL)
\$5.00 Certificate of Status (OPTIONAL)

Robert L. Crawford, Authorized Signatory

Typed or printed name of signee

FAX AUDIT NO.: HOLO00031323