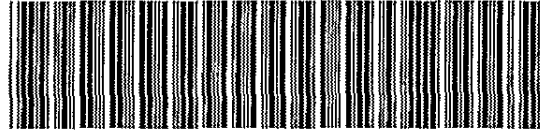


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SECRETARY OF STAT
TALLAHASSEE, FLORI



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(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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TRANSMITTAL LETTER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: KEY ENVIRONMENTAL MANAGEMENT, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph Venezia

(Name of Person)

(Firm/Company)

4178 Central Sarasota Parkway #323

(Address)

Sarasota, Florida 34238

(City/State and Zip Code)

For further information concerning this matter, please call:

Joseph Venezia

(Name of Person)

at (941) 921-6868

(Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

KEY ENVIRONMENTAL MANAGEMENT, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4178 Central Sarasota Parkway #323

Sarasota, Florida 34238

Mailing Address:

P O Box 22106

Sarasota, Florida 34276

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Joseph Venezia

Name

4178 Central Sarasota Parkway #323

Florida street address (P.O. Box **NOT** acceptable)

Sarasota, Florida

FLORIDA 34238

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability 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 complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes..



Registered Agent's Signature

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Joseph Venezia

4178 Central Sarasota Parkway #323

Sarasota, Florida 34238

MGRM

Frank Sirico

19 Pine Lake Drive

Patchogue, New York 11772

MGRM

Daniel Lisenski

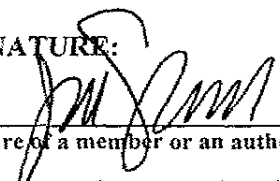
224 Hibiscus Street

Nokomis, Florida 34275

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:



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.)

Joseph Venezia

Typed or printed name of signee

Filing Fees:

\$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)