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•	2004 APR 20	P 1: 24	
	SECRETARY TALLAHAS	GE STATE FLORIDA	Tanda anni mana mada akina akina akina ahan akina mada akina a
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## TRANSMITTAL LETTER

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TO: Registration Section
Division of Corporations

2004 APR 20 P 1: 24

SECRETARY OF STATE

(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:

Morris Beneini
(Name of Person)
OES Environmental Inc. (Firm/Company)
(Firm/Company)
2830 Parkway St.
(Address)
Lateland, FL 33811
(City/State and Zip Code)

For further information concerning this matter, please call:

Morris Bencini at (163) 683-4646 - x 226
(Name of Person) (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

## FILED

2004 APR 20 P 1: 24

SECRETARY OF STATE

ARTICLE 1 - Name: The name of the Limited Liability Compar	ny is:		SECRETARY OF TALLAHASSEE. I
Sunstate Remedie	tion	Services,	160
ARTICLE II - Address: The mailing address and street address of	the princip	al office of the Lin	nited Liability Company is
Principal Office Address:		Mailing Add	ress:
2830 Parkway St.	•	2830 /	erkway St.
Lakeland, FL		Lakela	arkway St.
33811		338/	<u>′</u>
ARTICLE III - Registered Agent, Regis The name and the Florida street address of			Agent's Signature:
Morris	Ben.	· · ·	_
Sego Par J	Kway ess (P.O. Box	S 7.  NOT acceptable)	_
LaKela, City,	State, and Zi	FLORIDA 736	<u>/</u> /

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

Page 1 of 2 (CONTINUED)

FILED

ARTICLE IV- Manager(s) or Managi The name and address of each Manager	ng Member(s): or Managing Member is as follows: 2007 APR 20 P 1: 24		
Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address: SECRETARY OF STATE TALLAHASSEE, FLORIDA		
MGR	Mossis Beneini 2830 Parkway St. Lakelad, El 33811		
MGRM	Gary Kihn 2830 Markway St. Lakeland, FL 33811		
<u>m G R m</u>	Jem Spohn 2830 Parkway St. Lakeland, FG 33611		
(Use attachment if necessary)			
NOTE: An additional article must be	e added if an effective date is requested.		
REQUIRED SIGNATURE:	_		
- donis!	Benin		
Signature of a member or an a	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.)			
Morris Be Typed or pr	nem		
Typed or pr	rinted 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)