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HI.W

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305)634-3894 Fax Number : (305)633-9696 NE FOO

LIMITED LIABILITY COMPANY

sunrise recycling, llc

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Electronic Filing Menu.

Corporate Filing

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
SUNRISE RECYCLING, LLC	
ARTICLE II - Address: The mailing address and street address of the principal	l office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
700 N.W. 21 Terrace	700 N.W. 21 Terrace
Fort Lauderdale, Florida	Fort Lauderdale, Florida
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the register	
JON D. BLAKESBERG	- 04
Name	न्त्र भाग
951 S.W. Fourth Avenue	8
Florida street address (P.O. Box)	
	LORIDA 33432
City, State, and Zip	گ ار با ا

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.

CHREIBER, ESQ.

Prepared by: A. ALFRED SCHREIBER, ESQ. Schreiber, Schreiber & Schreiber, Esq. 5600 Sheridan Street

Hollywood, FL 33021 FBN: 149077 (954) 966-5600 Page 1 of 2 (CONTINUED)

Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR JAMES MARTINO 700 N.W. 21 Terrace Fort Lauderdale, FL (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 berein are true.) yped or printed name of signee

Filing Free:

\$160.00 Filing Fee for Articles of Organization

S 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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