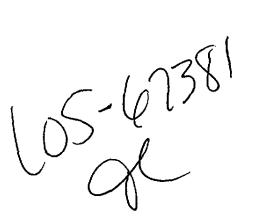


(Re	equestor's Name)	
(Ad	ddress)	
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(0)	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bt	usiness Entity Nam	re)
(Do	ocument Number)	<u></u>
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
	Office Use Only	1



07/05/05--01050--017 **155.00



TRANSMITTAL LÉTTER

TO: Registration So Division of Co		_	
SUBJECT: Sunshine	Pallet Recycling LLC		
		Liability Company)	·
The enclosed Articles o	f Organization and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matter	r to the following:	
Grace K	. West		
	(N	Tame of Person)	
Watkins Dulac & Ro	a DC		
Walkins Dulac & Ro		irm/Company)	
	ay Center, 17 East	(Address)	
Pittsb	ourgh, PA 15222 (City/5	State and Zip Code)	
	City	sale sale sale codes	
For further information	concerning this matter, please o	eall:	
Grace K. West (Name	of Person)	at (412) 434-5544 x (Area Code & Daytime Te	lephone Number)
Enclosed is a check for	or the following amount:		ا این این این این این این این این این ای
□ \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLE I - Name: The name of the Limited Liability Comp	pany is:
Sunshine Pallet Recycling LLC	
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3722 Bright Avenue	3722 Bright Avenue
Jacksonville, FL 32254	Jacksonville, FL 32254
ARTICLE III - Registered Agent, Reg	gistered Office, & Registered Agent's Signature: of the registered agent are:
John Cory, Jr.	
	Name
46 Fairway Circle	
Florida s	street address (P.O. Box NOT acceptable)
New Symma Beach, F.	L 32168 _{FT.}

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, F.S..

(CONTINUED)

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	William Biedenbach
	1872 Fairhill Road
	Allison Park, PA 15101
MGR	John Cory III
	- 1863 Dolphin Drive 1221 WOOD hill Drive
	- 1863 Dolphin Drive 1821 Woodhill Drive Allison Park, PA 15181 Gibbonia, PA. 15044
MGR	John Cory, Jr.
	46 Fairway Circle
	New Symma Beach, FL 32168
(Use attachment if necessary)	
•	t be added if an effective date is requested.
REQUIRED SIGNATURE:	_
John Con	-/ - &
Signature of a memb	of an authorized representative of a member.
	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

John Cory, Jr.

Typed or printed name of signee