

LO7000008781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

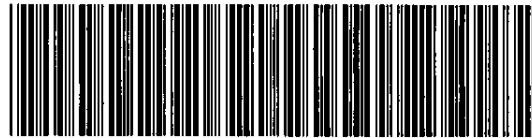
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FILED
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07 JAN 24 PM 3:28
2007 JAN 24 AM 11:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING



CT

a Wolters Kluwer business

CT

1203 Governors Square Blvd.
Tallahassee, FL 32301-2960

850 222 1092 tel
850 222 7615 fax
www.ctlegalsolutions.com

January 24, 2007

Secretary of State, Florida
2661 Executive Circle Center
Tallahassee FL 32301

FILED
07 JAN 24 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re: Order #: 6836259 SO
Customer Reference 1: 335735-5
Customer Reference 2:

Dear Secretary of State, Florida:

Please obtain the following:

WRH Panama City Beach, LLC (FL)
Formation
Florida

WRH Panama City Beach, LLC (FL)
Certificate of Status-Domestic
Florida

WRH Panama City Beach, LLC (FL)
Cert Copy of Articles of Org
Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.



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1203 Governors Square Blvd.
Tallahassee, FL 32301-2960

850 222 1092 tel

850 222 7615 fax

www.ctlegalsolutions.com

Sincerely,

Ashley A. Mitchell
Fulfillment Specialist

Ashley.Mitchell@wolterskluwer.com

FILED
07 JAN 24 PM 3:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

WRH Panama City Beach, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

c/o Emerald Waste Services, LLC

2259 Hwy 20 West

Freeport, Florida 32439

Mailing Address:

c/o WHI Capital Partners

191 North Wacker Drive, Suite 1500

Chicago, IL 60606-1899

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

C T Corporation System

Name

1200 South Pine Island Road

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

Plantation, Florida 33324

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, F.S..

C T Corporation System

Registered Agent's Signature (REQUIRED)

James M. Halpin

Assistant Secretary

(CONTINUED)

Page 1 of 2

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:

Managing Member

Waste Recyclers Holdings, LLC

c/o WHI Capital Partners

191 N. Wacker Drive, Suite 1500

Chicago, IL 60606-1899

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Adam Schechter, Authorized Representative of Managing Member

Typed or printed name of signee

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)