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EXAMINER

# **COVER LETTER**

Division of C	Corporations		
<sub>SUBJECT:</sub> Casto	o Environmental Se	ervices LLC	
50b0EC1	(Name of Limit	ed Liability Company)	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
Joel P. C	asto		
		(Name of Person)	
Casto Er	nvironmental Servic	es LLC	
		(Firm/Company)	
205 Fox	Run Circle		
	"	(Address)	ZOO TAI
Crawford	ville, FI, 32327		2008 FEB SECRETI
	(Cit	y/State and Zip Code)	26 SS
For further information	n concerning this matter, please	e call:	AH 10: 31 FOR STATE EE, FLORIG
Joel P. Casto		at ( 850 ) 443-361	<u></u>
(Nan	ne of Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<b>V</b>	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C	

Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	s:	
	,	
Casto Environmental Services LL	C	
(Must end with the words "Limited Liab	pility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	principal office of the Limited Liabilit	y Company is:
Principal Office Address:	Mailing Address:	
205 Fox Run Circle	205 Fox Run Circle	
Crawfordville, FI, 32327	Crawfordville, FI, 32327	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)  The name and the Florida street address of the Joel P. Casto  Name  205 Fox Run Circle  Florida street act  Crawfordville,  City, State,	registered agent are:  registered agent are:  ddress (P.O. Box NOT acceptable)  FL 32327	

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..

Registred Agent's Signature (REOUIRED)

(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:	Name and Address:	
"MGR" = Manager "MGRM" = Managing Member		
, MGR	Joel P. Casto	
	205 Fox Run Circle	_
	Crawfordville, FI 32327	_
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(Use attachment if necessary)	AHE HE	833
	March 1 2000	$\sim$
LE V: Effective date, if other than the	e date of filing: March1,2008 (伯克	ONA
days after the date of filing.)	pe specific and cannot be more than five business	aay
uays after the date of filling.)	ORI	0: 3
	D	-
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.)

Joel P. Casto

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)