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Florida Department of State  
Division of Corporations  
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Division of Corporations  
Fax Number : (850) 617-6383

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Account Name : FASTKIT CORPORATE OUTFITS  
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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**GATOR RECYCLING, LLC**

Certificate of Status	0
Certified Copy	1
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H08000158707 3

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I – Name:**

The name of the Limited Liability Company is:

**Gator Recycling, LLC**

**ARTICLE II – Address:**

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

**1131 SW 32<sup>nd</sup> Street  
Palm City, Florida 34990**

**ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:**

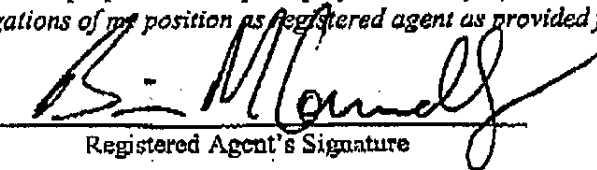
The name and the Florida street address of the registered agent are:

**Brian M. Counelly**  
Name

**1131 SW 32<sup>nd</sup> Street**  
Florida street address (P.O. Box not acceptable)

**Palm City, Florida 34990**  
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.*

  
Registered Agent's Signature

**Frank A. Ferraro, CPA, PA  
3601 SE Ocean Boulevard, Ste. 005  
Stuart, Florida 34996  
772-283-5001**

H08000158707 3

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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

“MGR” – Manager

“MGRM” – Managing Member

Name and Address:

MGRM

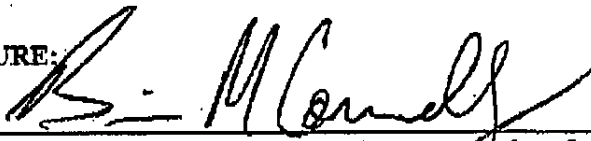
Brian M. Connelly  
1131 SW 32<sup>nd</sup> Street  
Palm City, Florida 34990

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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 the document constitutes an affirmation under penalties of perjury that the facts stated herein are true)*

Brian M Connelly

Typed or printed name of signee

Frank A. Ferraro, CPA, PA  
3601 SE Ocean Boulevard, Suite 005  
Stuart, Florida 34996  
772-283-5001

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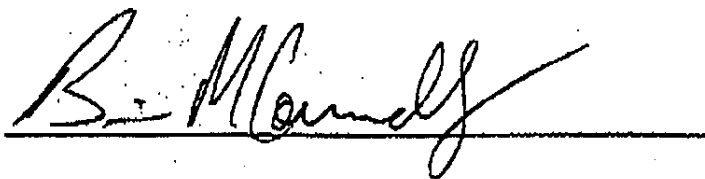
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**ARTICLE IV – MANAGEMENT (Check if applicable)**

X

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.

(An additional article must be added if an effective date is requested)



(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)

Brian M. Connelly

Typed or printed name of signee

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