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(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	-
(Business Entity Name)	<u>;</u>
(Eddiness-Entity Hame)	1 1
(Document Number)	1
Certified Copies Certificates of Status	<u>;</u>
Special Instructions to Filing Officer:	+

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C. LEWIS SEP 1 1 2009 EXAMINER

COVER LETTER

TOy Registration Sec Division of Corp	
SUBJECT: Bi	River Recycling, L.L.C. Name of Limited Liability Company
The enclosed Articles of C	rganization and fee(s) are submitted for filing.
Please return all correspon	dence concerning this matter to the following:
4-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Harry W. Cumbaa + David Kyle Name of Person
	Big River Recycling, L.L.C. Firm Company
	19041 SR 20 West
	Blountstown FL 32424 City State and Zip Code
<u>họ</u>	rryCumbaa@ yahoo. Com E-mail address: (to be used for future annual report notification)
For further information con	ncerning this matter, please call:
Janet C. Tar	Nor at (850) 674-4878 Person Area Code & Daytime Telephone Number
Enclosed is a check for t	he following amount:
\$125.00 Filing Fee	\$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability C	Company is:	
Big Riv (Must end with the words)	Ver Recycling L.L.C. "Limited Liability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street addre	ess of the principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
19041 SR 20 West Blountstown, FL 32424	19041 SR 20 V Blowntstewn, Fl	Vest
The Limited Liability Company cannot serve as business entity with an active Florida registration. The name and the Florida street address and the Florida street address and the Florida street address at the Florida street.		Signature: dual or another 2009 SEP 10 PA 12: 21 SECRETARY OF STATE TALLAHASSEE, FLORIDA
liability company at the place des registered agent and agree to act in a statutes relating to the proper and d	gent and to accept service of process for the a signated in this certificate, I hereby accept the this capacity. I further agree to comply with complete performance of my duties, and I am ition as registered agent as provided for in C	e appointment as the provisions of all 1 familiar with and

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED

ARTICLE IV- Manager(s) or Ma	anaging Member(s):	llows 2000 om-
The name and address of each Man	ager or wanaging weinder is as re	SEP 10 PM 12: 2
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	SECRETARY OF STAT TALLAHASSEE. FLORID
MGRW - Managing Member	Harry W. Cur	nbaa
MACO	19041 STR Blountstown	2 20 West FL 32424
MGK	C. David Ku 16596 NE Luk Altha, Fu	11e e. Holland Road - 32421
(Use attachment if necessary)		
RTICLE V: Effective date, if other than the an effective date is listed, the date must or 90 days after the date of filing.)		(OPTIONAL) nan five business days prior
REQUIRED SIGNATURE:	2 0	
Signature of a mem	ber or an authorized representative of	a member.
(In accordance with	section 608.408(3), Florida Statutes, the constitutes an affirmation under the penaltic	execution
	Harry W. Cumbaa	

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)