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SECREPANY OF STATE
TALLARSSEE FLORIDA

N. G. MAY 1 1 2016

## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJEC	221 Stone Road, LLC		
SOBJEC		me of Limited Liability Company	<del></del>
The encl	osed Articles of Organization and	fee(s) are submitted for filing.	
Please re	eturn all correspondence concernir	ng this matter to the following:	
	Shane Burda		
		Name of Person	
	Waste Equipment & Parts		
		Firm/Company	
	4902 South 16th Ave, Suite E		
		Address	
	Tampa, FL 33619		
	ahana@wagta aguin gam	City/State and Zip Code	
	shane@waste-equip.com	o be used for future annual report notification)	
For furthe	r information concerning this matter		
	Shane Burda	813 842-4854 at ( )	
	Name of Person	Area Code Daytime Telephone Nun	nber
Enclosed	d is a check for the following amo	unt:	
]\$125.00	Filing Fee \$130.00 Filing Certificate of S	Status Certified Copy (additional copy is enclosed) C	160.00 Filing Fee, Certificate of Status & Pertified Copy ditional copy is enclosed)
	Mailing Address	Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

221 Stone Road, LL	.C	
(Must end	with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
	address of the principal office	e of the Limited Liability Company is:
•	-	e of the Limited Liability Company is:  Mailing Address:
ailing address and street a	oal Office Address:	Mailing Address:
ailing address and street a	oal Office Address:	

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:

Waste Equipment &	Parts, LLC	
	Name	
4902 South 16th Av	e, Suite E	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Tampa	FL	33619
City	State	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

"AMDD" - Ass	thorized Member	Name and Address:	
"MGR" = Mana MGR	ager	Shane Burda	
MOK		9615 Royce Dr.	
		Tampa, FL 33619	
		Tampa, 1 E 33019	
MGR		Brian Burns	
		1550 Larimer Street, Suite 118	
		Denver, CO 80202	
	<del></del>		
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ARTICLE IV-

Page 2 of 2