

**CORPORATE ACCESS INC.**

**L98000000134**

1100 D Thomasville Road, Morris Brown Square, Tallahassee, FL 32303  
 P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP** 2-2-98

\_\_\_\_\_ CERTIFIED COPY \_\_\_\_\_ CUS \_\_\_\_\_

X PHOTO COPY \_\_\_\_\_ X FILING LC

1.) Inter Active Recycling  
 (CORPORATE NAME & DOCUMENT #)

2.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

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 -02/03/98--01001--004  
 \*\*\*\*\*285.00 \*\*\*\*\*285.00

3.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

4.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

5.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

6.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

7.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

8.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

9.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

10.) \_\_\_\_\_  
 (CORPORATE NAME & DOCUMENT #)

**SPECIAL INSTRUCTIONS** \_\_\_\_\_

L98-134

Name Availability	<u>222</u>
Document Examiner	<u>[Signature]</u>
Updater	<u>[Signature]</u>
Updater Verifier	<u>[Signature]</u>
Acknowledgment	<u>[Signature]</u>
W. P. Verifier	<u>[Signature]</u>

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**ARTICLES OF ORGANIZATION FOR  
INTERACTIVE RECYCLING, L.C.**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: Interactive Recycling, L.C.

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is  
842 Meridian Ave., #2C, Miami Beach, FL 33139

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

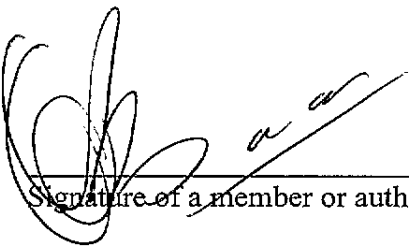
**ARTICLE IV - Management:**  
(check and complete the appropriate statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s)  
and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and  
address(es) of the managing member(s) is/are:

Mr. Pieter Baas  
842 Meridian Ave, #2C  
Miami Beach, FL 33139

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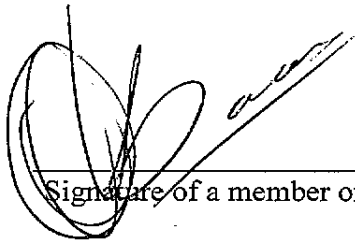
  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

(The execution of these Articles of Organization constitutes an affirmation under the penalties of  
perjury that the facts stated herein are true.)

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of Interactive Recycling, L.C. deposes and says:

- 1) the above named limited liability company has at lease two members
- 2) the total amount of cash contributed by the member(s) is \$50,000
- 3) if any, the agreed value of property other than cash contributed by member(s) is \$0
- 4) the amount of cash or property anticipated to be contributed by member(s) is \$50,000  
This total includes amounts from 2 and 3 above.

A handwritten signature in black ink, consisting of a large, stylized 'O' followed by a series of loops and a long horizontal stroke extending to the right.

\_\_\_\_\_  
Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Interactive Recycling, L.C.
2. The name and address of the registered agent and office is:

Susan Tiffany, Esq.  
(Name)

345 Ocean Drive, #910  
(Street)

Miami Beach, FL 33139  
(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 am familiar with and accept the obligations of my position as registered agent.

Susan Tiffany  
(Signature)

1/30/98  
(Date)

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