

M 220000007617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

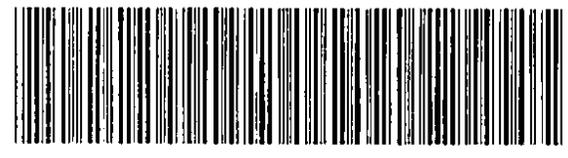
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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2022 MAY 16 AM 11:21

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TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 658764 4371937
AUTHORIZATION : *[Signature]*
COST LIMIT : \$ 125.00

ORDER DATE : May 4, 2022
ORDER TIME : 9:35 AM
ORDER NO. : 658764-015
CUSTOMER NO: 4371937

FOREIGN FILINGS

NAME: GREENWAY WASTE & RECYCLING
OF INDIANA LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Greenway Waste & Recycling of Indiana LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michelsa Calderon
Name of Person
Trivest Partners
Firm/Company
550 S. Dixie Hwy #300
Address
Coral Gables, FL 33146
City/State and Zip Code
mcalderon@trivest.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelsa Calderon at (305) 858-2200
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Greenway Waste & Recycling of Indiana LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. IN 46-3158517
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. (Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 1300 E. 86 ST 1300 E. 86 ST
(Street Address of Principal Office) (Mailing Address)
Unit 90015 Unit 90015
Indianapolis, IN 46290 Indianapolis, IN 46290

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Corporation Service Company
Office Address: 1201 Hays Street
Tallahassee, Florida 32301
(City) (Zip code)

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TALLAHASSEE, FLORIDA

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Eyleina Baher
Corporation Service Company
Assistant Vice President
(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: Manager
Name and Address: Name: Affinity Acquisition Corporation
 Address: 550 S. Dixie Hwy #300
Coral Gables, FL 33146
 Person _____
 Other _____ Other _____

Title or Capacity: Manager
Name and Address: Name: Jeffrey S. Miller
 Address: 1300 E. 86 ST
Unit 90015
 Person Indianapolis, IN 46290
 Other _____ Other _____

Manager Name: Forest Wester
 Member Address: 550 S. Dixie Hwy #300
 Authorized Coral Gables, FL 33146
 Person _____
 Other EVP Other _____

Manager Name: J. Benjamin Balsley IV
 Member Address: 550 S. Dixie Hwy #300
 Authorized Coral Gables, FL 33146
 Person _____
 Other EVP Other _____

Manager Name: David Gershman
 Member Address: 550 S. Dixie Hwy #300
 Authorized Coral Gables, FL 33146
 Person _____
 Other Secretary Other _____

Manager Name: Matthew Bates
 Member Address: 550 S. Dixie Hwy #300
 Authorized Coral Gables, FL 33146
 Person _____
 Other EVP Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

David Gershman

Signature of an authorized person

David Gershman

Typed or printed name of signee

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

I, HOLLI SULLIVAN, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

GREENWAY WASTE & RECYCLING OF INDIANA LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on July 09, 2013, and was in existence or authorized to transact business in the State of Indiana on May 13, 2022.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, May 13, 2022

A handwritten signature in cursive script that reads "Holli Sullivan".

HOLLI SULLIVAN
SECRETARY OF STATE

2013070903113 / 20222585262

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on June 12, 2022.