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TRANSMITTAL LETTER

FILED

00 AUG 14 AM 10:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**SUBJECT:** WASTECYCLE SOLUTIONS, INC.  
(PROPOSED CORPORATE NAME -- MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00 Filing Fee  
☐ \$78.75 Filing Fee  
& Certificate of Status

☒ \$78.75 Filing Fee  
& Certified Copy  
☐ \$87.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** Robert R. McElhaney  
Name (Printed or typed)

888803356169--8  
-08/15/00--01019--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

3933 Salmon Drive  
Address

Orlando, FL 32835  
City, State & Zip

407-295-3818  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**

*Robert R. McElhaney*

# ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

## ARTICLE I NAME

The name of the corporation shall be:

WASTECYCLE SOLUTIONS, INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3933 Salmon Drive  
Orlando, FL 32835

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Organic Waste Recycling Methods

## ARTICLE IV SHARES

The number of shares of stock is:

One Thousand (1000)

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Robert R. McElhaney  
3933 Salmon Drive  
Orlando, FL 32835

## ARTICLE VI REGISTERED AGENT

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

Robert R. McElhaney  
3933 Salmon Drive  
Orlando, FL 32835

## ARTICLE VII INCORPORATOR

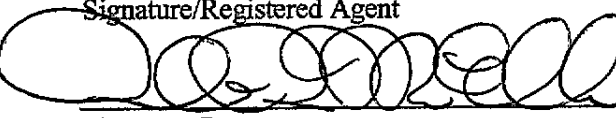
The name and address of the Incorporator is:

Robert R. McElhaney  
3933 Salmon Drive  
Orlando, FL 32835

\*\*\*\*\*

*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Signature/Registered Agent

  
Signature/Incorporator

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Date

  
Date