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SECRLIARY OF STATE
TALLAHASSEE, FLORIDA

or 2/3/12

COVER LETTER

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

SUBJECT: Plastic Specialties, Inc.	'E NAME – MUST INCLUDE SUFFIX)
Enclosed are an original and one (1) copy of the artic	
Filing Fee & Certificate of Status	Filing Fee, & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Steven J. Gnerre Name	(Printed or typed)
461 18th Street, S.E.	ddress 7
Naples, Florida 34117	FIL CRETAR LAHAS
239-643-0933	State & Zip
Daytime Te info@plasticspecialties of E-mail address: (to be used	lephone number Florida.com
E-mail address: (to be used	for future annual report notification)

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

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

ARTICLE I The name of the con			FILED
ARTICLE II PRINCIPAL OFFICE		1	2 FEB -2 PM 3: 21
<u> </u>	Principal street address	Mailing addr	ress. if different ist of ATT
3	573B Arnold Avenue	ن الماسية الماسية	ess, if different is: STATE
	aples, Florida 34103 3 4 10 4		ALLAHASSEE, FLORIDA
4.1	, , , , , , , , , , , , , , , , , , , ,		40
_			and a state of the second seco
ARTICLE III			
	hich the corporation is organized is:		
All purposes [permitted by law.		
	SHARES		
The number of shar	es of stock is: 100		
ADTICIE U	INITIAL OFFICERS AND/OR DIRECTOR	S	
	tle:Steven J. Gnerre, President		
Address:	461 18th Street, S.E.		
. 100. 100.	Naples, Florida 34117		
	Hopico, Lionos Ottili		
	tle:Carrie F. Gnerre, Secretart/Treasure	Name and Title:	
Address:	461 18th Street, S.E.	_ Address:	······································
	Naples, Florida 34117	<u></u>	
Name and Tit	tle:	Name and Title:	
Address:		A ddeaga	
4 DØIGI B 17			
	REGISTERED AGENT	· · · · · · · · · · · · · · · · · · ·	
Name:	rida street address (P.O. Box NOT acceptable) of Roger E. Craig	the registered agent is:	
Address:	4041 Gulf Shore Blvd. N., #604	-	
Addiess.	Naples, Florida 34103	-	
	Maples, Coloa 54 105	-	
ARTICLE VII	<u>INCORPORATOR</u>		
The name and add	ress of the Incorporator is:		
Name:	Stephen J. Gnerre Steven J.	onere	
Address:	Stephen J. Gnerre Steven J. 461 18th Street, S.E.	_	
	Naples, Florida 34117	_	
Uming been name	nd as paristaned against to account parishes of suppose	for the above stated company	tion at the place decision at a dis-
this certificate I an	d as registered agent to accept service of process n familiar with and accept the appointment as regi	is for the above stated corporal istered agent and agree to act i	non at the place designated in
ans cernyicuse, 1 un	Junique van aprieccept the appointment as regi	sieren ageni ana agree waci i	п тіз сарасиу
			0
	Required Signature Begistered Agent		Jan. 28, 2012 Date
•	Acquired Signature acgistered Agent		V Date
I submit this docui	ment and affirm that the facts stated herein are	true. I am aware that the fal	se information submitted in a
	partment of State constitutes a third degree felony		
77		· •	
Stere	Grew		Jan 28 2012
	Required Signature/Incorporator		Date