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PICK-UP	MAIT	MAIL
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Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	

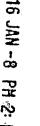




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SECRETARY OF STATE





## **COVER LETTER**

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

SUBJECT:	MiniBINZ Inc					
	(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)					
Enclosed are an o	original and one (1) copy of the arti	icles of incorporation and	a check for:			
\$70.00 Filing Fee	· · · · · · · ·	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status			
		ADDITIONAL COPY REQUIRED				
FROM: _	Michelle Seidl  Name (Printed or typed)					
_	922 SE 14 <sup>th</sup> PL Address					
_	Cape Coral, Florida 33990					
	City, State & Zip					
_	239-573-9700	elephone number				
	mseidl@comcast.net	elephone number				
	E-mail address: (to be used	I for future annual report n	otification)			

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)



	on shall be: MiniBINZ Inc		16 JAN -8 PM 2: 14
he name of the corporation shall be:		1	SECRETARY OF STATE Mailing address, if different is: ORIDA
922 SE 14 <sup>th</sup> PL			
Cape Coral, Florida 33	3990		
ARTICLE III PURPOS The purpose for which the	SE e corporation is organized is:		
To provide a rental d	umpster roll-off service		
<u> </u>			
	OFFICERS AND/OR DIRECTORS  Michael Radford, President/COO	Name and Title:_	Duane Lopez, V President/CSO
Address _	17891 Wetstone Rd	Address:	
	17071 Westerio Ita	Addicss.	2451 Ashbury Cir
_	N Fort Myers, Florida 33917	Address.	2451 Ashbury Cir Cape Coral, Florida 33991
- Name and Title:_		<u> </u>	Cape Coral, Florida 33991
	N Fort Myers, Florida 33917	Name and Title:	Cape Coral, Florida 33991
	N Fort Myers, Florida 33917  Milo Seidl, Sect/Trs/CFO	Name and Title:Address:	Cape Coral, Florida 33991
Address _	N Fort Myers, Florida 33917  Milo Seidl, Sect/Trs/CFO  922 SE 14 <sup>th</sup> PL  Cape Coral, FL 33990	Name and Title:Address:	Cape Coral, Florida 33991
Address	N Fort Myers, Florida 33917  Milo Seidl, Sect/Trs/CFO  922 SE 14 <sup>th</sup> PL  Cape Coral, FL 33990	Name and Title:Address:	Cape Coral, Florida 33991
Address _	N Fort Myers, Florida 33917  Milo Seidl, Sect/Trs/CFO  922 SE 14 <sup>th</sup> PL  Cape Coral, FL 33990	Name and Title:Address:	Cape Coral, Florida 33991



Name a	nd Title:	Name and Title:_	16 JAN -8 PH	2: 14
Addres	s	Address:	SECRETARY OF STALLAHASSEE. FLO	PAIDA
ARTICLE VI	REGISTERED AGENT			
The name and I	lorida street address (P.O. Box NOT acceptabl	e) of the registered agen	t is:	
Name:	Michelle Seidl			
Address:	922 SE 14 <sup>th</sup> PL			
	Cape Coral, FL 33990			
<u>ARTICLE VII</u>	INCORPORATOR			
The <u>name and a</u>	address of the Incorporator is:			
Name:	Milo Seidl	·		
Address:	922 SE 14 <sup>th</sup> PL			
	Cape Coral, Fl 33990			
Effective date, it	EFFECTIVE DATE:  f other than the date of filing: January 1, 2016 date is listed, the date must be specific and ca			r 90 business
	inserted in this block does not meet the applical effective date on the Department of State's recor		nirements, this date will	not be listed as
Having been na this certificate, I	med as registered agent to accept service of pro am familiar with and accept the appointment as	cess for the above state registered agent and a	gree to act in this capac	ity
	Required Signature/Registered Agent			-2016 Date
I submit this dod document to the	ument and affirm that the facts stated herein a Department of State constitutes a third degree fe	re true. I am aware tha lony as provided for in	t the false information . s.817.155, F.S.	submitted in a
			11	160
Requ	ired Signature/Incorporator			Pate