Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:			

FLORIDA PROFIT/NON PROFIT CORPORATION PAPER RECYCLING OF JACKSONVILLE INC

Certificate of Status	0
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 (Profit)

ARTICLE I NAME: The name of the corporation is:

aper Recycling of	Jacksonville Inc
ARTICLE II PRIN	
The principal street address	and mailing address is:
15476 NW	
Miami	Lakes FL 33016
ARTICLE III SHARES: The number of s	shares of stock is:
ARTICLE IV INITIAL DIREC	TORS AND/OR OFFICERS:
Ney Meja	(P)
	· .
ARTICLE V INITIAL REGISTERED	AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box r	not acceptable) of the registered agent is:
Nery Mejia	
15476 NW 77	(our+
Miami Lakes	FL 33016
ARTICLE VI INCORPORATOR: The n	
Neal Melic	ame and address of the Incorporator is:
15476 NILL) 7	7 COURT
Miami Lakes	FL 33016

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Required Signatures:

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

Registered Agent C-17-17

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felong as provided for in s.817.155, F.S.

Incorporator Total Daie