

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

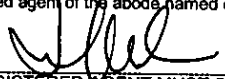
CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Hams Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P94000065267			
1. Corporation Name CITY ENVIRONMENTAL SERVICES, INC. OF MIAMI			
2. Principal Office Address 3400 East Lafayette		3. Mailing Office Address 3400 East Lafayette	
Suite, Apt. #, etc. N/A		Suite, Apt. #, etc. N/A	
City & State Detroit, Michigan		City & State Detroit, Michigan	
Zip 48207	Country U.S.A.	Zip 48207	Country U.S.A.

FILED
02 OCT -3 PM 4: 56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
700008340137--5
-10/11/02--01065--020
*****8.75 *****8.75
REINSTATEMENT 00-02
700008340137--5
-10/11/02--01065--019
*****150.00 *****150.00

4. Date Incorporated or Qualified To Do Business in Florida 09/06/94	
5. FEI Number 65-0524544	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name CT Corporation System	
Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road	
Suite, Apt. #, Etc. N/A	
City Plantation	State FL
	Zip Code 33324

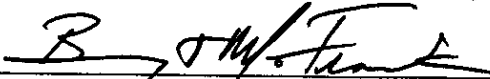
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, VS.

Signature of Registered Agent  **Jennifer L. Gollbach** Date 10/2/02
Asst. Secretary
REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/D	Peter C. Saputo	3400 East Lafayette	Detroit Michigan 48207
T	Michael L. Piesko	3400 East Lafayette	Detroit Michigan 48207
S	Bryant M. Frank	3400 East Lafayette	Detroit Michigan 48207

700008340137--5
-10/11/02--01065--021
*****900.00 *****900.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 61 T, F.S. I further certify* that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:  **Bryant M. Frank, Corporate Secretary**
Date 10/01/02 (313) 567-7000
Daytime Phone # 