# P960000 34704

April 03, 1996

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

RE: South Dade Recycling Center

Gentlemen:

8000 1178588 -04/18/9; 1058--010 \*\*\*\*122.50 \*\*\*\*122.50

We are submitting the following documents for the above-named corporation and request processing of these for a new corporation in the State of Florida.

- 1. Articles of Incorporation (two copies)
- 2. Designation of Resident Agent/Office (two copies)
- 3. Check for \$122.50 for filling fee

We appreciate your attention to this request. If you have and questions, please do not hesitate to call us. (305)470-9444.

Sincerely

Rita M. Valdes

Secretary/Treasurer

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#### ARTICLES OF INCORPORATION

OF

#### SOUTH DADE RECYCLING CENTER



I, the undersigned subscriber of these Articles of Incorporation, a natural person, competent to contract and desiring to form a corporation under the laws of the State of Florida, hereby certify as follows:

ī

The name of the proposed corporation is:

#### SOUTH DADE RECYCLING CENTER

П

The corporation may engage in any activity or business permitted under the laws of the United States, and of the State of Florida.

Ш

The maximum number of shares of stock which the Corporation is authorized to have outstanding at any time shall be:

#### ONE HUNDRED SHARES

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This Corporation shall have perpetual existence beginning on the date of incorporation.

٧

The principal business office of the Corporation shall be located at:

7809 Northwest 57th Street, Miami, Florida 33166

or at such other place as may later be designated by the Board of Directors, with branch offices in such other cities, towns, States, or countries as may, from time to time, be authorized by its Board of Directors.

VI

The initial registered office address of this Corporation shall be:

230 Southwest 15th Street, Ft. Lauderdale, Florida 33315

And, the Registered Agent at such registered address is:

MAXIMILIANO J. ANDREU

The business of this Corporation shall be conducted by a Board of Directors which shall consist of all loss than one (1), and not more than nine (9) as shall from time to time be designated in the By-Laws of this Corporation, and a majority thereof shall constitute a quorum for the transaction of all business.

#### VIII

The name and street address of each person who is to serve as a member of the initial Board of Directors, who, subject to the provisions of these Articles of Incorporation, the By-Laws of this Corporation and the Laws of the State of Florida, shall hold office for the first year of corporate existence or until their successors are elected and are duly qualified, are:

PRESIDENT:
MAXIMILIANO J. ANDREU

VICE-PRESIDENT:
GRACIELA M. AMARO
SECRETARY-TREASURER:
RITA M. VALDES

ADDRESS

230 Southwest 15th Street
Ft. Landordale, Florida 33315

SECRETARY-TREASURER:
1055 West 30th Street
Hinlenh, Florida 33012

ΙX

The name and street address of each incorporates is:

NAME
ADDRESS

MAXIMILIANO J. ANDREU
230 Southwest 15th Street
Ft. Lauderdale, Florida 33315

GRACIELA M. AMARO
5859 Southwest 24th Street
Miami, Florida 33155

RITA M. VALDES
1055 West 30th Street
Hialeah, Florida 33012

X

The By-Laws of this Corporation may be created, amended, or changed by either the Stockholders of the Directors at any regular or duly scheduled special meeting.

ΧI

This Corporation shall have, in addition to a President, Vice-President, Secretary and/or Treasurer, such other additional officers as may be created from time to time by and under the authorization of its Dy-Laws.

All officers, agents and factors shall be chosen in such manner, hold their offices for such terms, and have such powers and duties as may be prescribed by the By-Luws or determined by the Board of Directors. Any person may hold two or more offices.

#### XIII

Every person who now is or hereafter shall become a Director of this Corporation shall be indemnified by the Corporation against all costs and expenses (including attorney's fees) hereafter reasonably incurred by or imposed upon him in connection with, or resulting from any action, suit or proceedings of whatever nature, to which he is or shall by made part by reason of his being or having been a Director of the Corporation whether or not he is a Director of the Corporation at the time he is made a party to such action, suit or proceeding, or at the time such cost or expense is incurred by or imposed upon him.

However, an exception is made to the above in relation to matters as to which he shall finally be adjudged in such action, suit or proceedings, to have been derelict in the performance of the duties imposed upon him as such Director.

The right of indemnification herein provided shall not be exclusive of other rights to which any such person may now or hereafter be entitled as a matter of law.

MAXINILIANO J. ANDREU  GRACIFLA MARO  RITA M VALDES  STATE OF FLORIDA)  SS:  COUNTY OF DADE )  19 7	ignis to which any shen person may now or never and and		
MAXINILIANO J. ANDREU  GRACIILIANI MARO  RITA M VALDES  STATE OF FLORIDA)  SS: COUNTY OF DADE )  I HEREBY CERTIFY that on the	acknowledged these Articles	of Incorporation this day of	
RITA M VALDES  STATE OF FLORIDA)  ss:  COUNTY OF DADE )  I HEREBY CERTIFY that on the day of		1that Tenuland Mintuit	
STATE OF FLORIDA)  88: COUNTY OF DADE )  I HEREBY CERTIFY that on the day of, personally appeared before me, an authorized officer duly commissioned o administer oaths and take acknowledgments,  all personally known, o me well known and, known to me to be the person(s) who executed the foregoing ARTICLES OF INCORPORATION and who acknowledged that it was signed and executed for the uses and purposes therein expressed.  IN WITNESS WHEREOF, I have become so my hand and official seal at Miami, Dade County, Florida the day and year first above written.	<u>گ</u> نیب	See A Manager	
STATE OF FLORIDA)  ss:  COUNTY OF DADE )  I HEREBY CERTIFY that on the day of	Rri	A M VALDES	
I HEREBY CERTIFY that on the day of price duly commissioned administer oaths and take acknowledgments, and personally known.  The most of the uses and purposes therein expressed.  IN WITNESS WHEREOF, I have because of Florida with the day and was above written.	STATE OF FLORIDA)	7	
I HEREBY CERTIFY that on the day of	88:		
on administer oams and take acknowledgments,  one well known and, known to me to be the person(s) who executed the foregoing ARTICLES OF INCORPORATION and who acknowledged that it was signed and executed for the uses and purposes therein expressed.  IN WITNESS WHEREOF, I have be feunto set my hand and official seal at Miami, Dade County, Florida the day and was first above written.  NOTARY PUBLIC, State of Florida	COUNTY OF DADE )		
o me well known and, known to me to be the person(s) who executed the foregoing ARTICLES OF INCORPORATION and who acknowledged that it was signed and executed for the uses and purposes therein expressed.  IN WITNESS WHEREOF, I have be fount on the seal at Miami, Dade County, Florida the day and was first above written.  NOTARY PUBLIC, State of Florida	I HEREBY CERTIFY that on the day of, 19		
Miami, Dade County, Florida, the day and war first above written.  NOTARY PUBLIC, State of Florida	all personally known, to me to be the person(s) who executed the foregoing ARTICLES OF INCORPORATION and who acknowledged that it was signed and executed for the uses and purposes therein expressed.		
NOTARY PUBLIC, State of Florida	IN WITNESS WHEREOF, I have be feunto set my hand and official seal at Miami, Dade County, Florida, the day and year first above written.		
	NC		
My Commission Expires:  STEVEN F. SOUTRE  MY COMMISSION # CC 428398  DUTRES: February 4, 1999  Bonded Thru Hotary Public Underwriters	My Commission Expires:	MY COMMISSION # CC 428398  EXPIRES: February 4, 1999	

## CERTIFICATE OF DESIGNATION REGISTERED AGENT / REGISTERED OFFICE

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Pursuant to the provisions of section 607.0501, Florida Stabiles of Florida, submits SELL FLORIDA the following statement in designating the registered office / registered agent, in the state of Florida.

1. The name of the corporation is:

### SOUTH DADE RECYCLING CENTER

2. The name and address of the registered agent and office is:

MAXIMILIANO J. ANDREU (NAME)

230 SOUTHWEST 15TH STREET (P.O. BOX NOT ACCEPTABLE)

FT. IAUDERDALE, FLORIDA 33315 (CITY / STATE / ZIP)

SIGNATURE Mulffene flund f. (corporate officer)

TTILE <u>PRESIDENT</u>

DATE 4/3/96

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY PROVISIONS AS REGISTERED AGENT.

SIGNATURE