P97000066530

TRANSMITTAL LETTER

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

	RESOURCE RECOV	/ERY , INC . name - must include su	ffix)	
Enclosed is an original	l and one (1) co	py of the articles o	07 **	022525870 7/30/9701070021 ****78.75 *****78.75 and a check
for : \$70.00 Filing Fee	X \$78.75 Filing Fee & Certificate	\$122.50 Filing Fee & Certified Copy Additional Cop	\$131.25 Filing Fee, Certified Copy & Certificate	
FROM:	Annette B. Alderson Name (printed or typed) 100 - 14th Avenue South Address St. Petersburg, FL 33701 City, State & Zip		SECTIONS STATE STA	
		822–3888 Telephone number		~ *

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

f. 1-7

ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

NATURAL RESOURCE RECOVERY, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

100 - 14th Avenue South St. Petersburg, Florida 33701

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100,000

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS
The name and address of the initial registered agent is:

Annette B. Alderson 100 - 14th Avenue South St. Petersburg, Florida 33701

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

- The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Annette B. Alderson 100 - 14th Avenue South St. Petersburg, Florida 33701

The und	lersigned inco	rporator(s) has(have	e) executed these Articles of Incor	poration thi
28th	day of	July	, 19 <u>97</u>	
(An addi	itional article i	must be added if an	effective date is requested.)	
		\sim		
		Unne	Signature Signature	
			Signature	
			Digitatore	
			Signature	

Notarization is not required

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The hame of the corporation is:	TATOME NESSONES TO	COVERT, INC.
2. The name and address of the re	gistered agent and office is:	<u> </u>
		97 JUL 30
	Annette B. Alderson	
	(Name)	
		30 .
	100 - 14th Avenue South	
(P.O.	Box or Mail Drop Box NOT ACCEPTA	BLE) S
		, e.
	Oh Baharaharan Et 2000	BLE) 9: 48
	St. Petersburg, FL 33701	
	(CITY/STATE/ZIP)	
Having been named as registere corporation at the place designate agent and agree to act in this cap relating to the proper and complet obligations of my position as regis	ed in this certificate, I hereby acc acity. I further agree to comply e performance of my duties, and	cept the appointment as registered with the provisions of all statutes
annette B. Ald		July 28, 1997 (DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314