

TRANSMITTAL LETTER

P99000089893

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

SUBJECT: MARION SANITATION SERVICES INC.
(Proposed corporate name - must include suffix)

500003012725--7
-10/12/99--01050--003
****158.75 *****78.75

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Joseph Fuller
Name (Printed or typed)

P.O. Box 6943
Address

OKALA FL 34478
City, State & Zip

352-266-0182
Daytime Telephone number

RECEIVED
OCT 12 PM 1:52
TALLAHASSEE, FLORIDA

RECEIVED
OCT 12 PM 1:44
TALLAHASSEE, FLORIDA

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

10/12

**ARTICLES OF INCORPORATION
OF
MARION SANITATION SERVICES, INC**

The undersigned subscribers to these Articles of Incorporation hereby form a corporation under the laws of the State of Florida.

**ARTICLE I
NAME**

The name of the corporation is **MARION SANITATION SERVICES, INC.**

ARTICLE II

The address of the corporation's principal office is:

**1183 S.E 56th Avenue
OCALA, FLORIDA 34471**

The corporation's mailing address is:

**P.O. BOX 6943
OCALA, FLORIDA 34478**

**ARTICLE III
SHARES**

This corporation is authorized to have **1000 shares of no par Common Stock.**

**ARTICLE IV
INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

**Joseph W. Fuller
1183 S.E. 56th Ave.
OCALA, FLORIDA 34471**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

59 OCT 12 PM 1:52

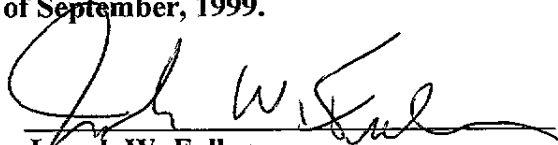
APPROVED
AND
FILED

ARTICLE V
INCORPORATOR

The name and address of the incorporator is: - - -

Joseph W. Fuller
1183 S.E. 56th Ave.
OCALA, FLORIDA 34471

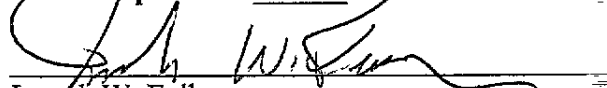
IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Incorporation this 30 day of September, 1999.


Joseph W. Fuller

CERTIFICATE OF REGISTERED AGENT

Having been named 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 and 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 position as registered agent.

Dated: September 30 1999.


Joseph W. Fuller

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

99 OCT 12 PM 1:52

APPROVED
AND
FILED