AZ Corp. Commission

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...ZONA CORP COMMISSION
F...E)

SEP 1 8 2016

FILE NO. F0124227 8

ARIZONA CORP. COMMISSION
FILED

OCT 2 4 2016

FILE NO. F-21242278

DO NOT WRITE ABOVE THIS LINE RESERVED FOR ACC USE ONLY.

APPLICATION FOR AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN ARIZONA

Read the Instructions CO18I

AZ CORPORATION COMMISSION
FILED

FEB 0 2 2017

FILE NO. F-2124227-8

1. **ENTITY TYPE** – check only one to indicate the type of entity applying for authority:

- [X] FOR-PROFIT CORPORATION
- [ ] NONPROFIT CORPORATION
- [ ] PROFESSIONAL CORPORATION
- [ ] CLOSE CORPORATION
- [ ] BUSINESS TRUST
- [ ] BUSINESS DEVELOPMENT CORP.
- [ ] CORPORATION SOLE
- [ ] INSURER
- [ ] SAVINGS AND LOAN ASSOCIATION
- [ ] CREDIT UNION
- [ ] TRUST COMPANY
- [ ] COOPERATIVE MARKETING ASSOCIATION
- [ ] ELECTRIC COOPERATIVE NON-PROFIT MEMBERSHIP ASSOC.
- [ ] NONPROFIT ELEC. GENERATION AND TRANSMISSION COOPERATIVE CORP.

2. **NAME IN STATE OR COUNTRY OF INCORPORATION (FOREIGN NAME)** – enter the exact, true name of the foreign corporation:
WASTEWATER SOLIDS MANAGEMENT, INC.

3. **NAME TO BE USED IN ARIZONA (ENTITY NAME)** – *see Instructions CO18I* – Identify the name the foreign corporation will use in Arizona by checking 3.1, 3.2, or 3.3 (check only one), and follow instructions

3.1 [X] Name in state or country of incorporation, with no changes – Go to number 4.	3.2 [ ] Name in state or country of incorporation, with a corporate *identifier added* to it – Enter the name in number 3.4 below.	3.3 [ ] Fictitious name (check this only if the foreign corporation's name in its state or country of incorporation is not available for use in Arizona) – Enter the name in number 3.4 below.
3.4 If you checked 3.2 or 3.3, enter or print the name to be used in Arizona:		

4. **FOREIGN DOMICILE** – list the state or country in which the foreign corporation is incorporated: NEVADA

5. **DATE OF INCORPORATION IN FOREIGN DOMICILE:** 5/1/2000

6. **DURATION** – the duration or life period of the foreign corporation is presumed to be perpetual unless one of the boxes is checked below and the blanks are filled in:

- [ ] The corporation's life period will end after the expiration of _____ years (enter a number of years).
- [ ] The corporation's life period will end on this date _____ (enter a date).
- [ ] The corporation's life period will end upon the occurrence of this event:

_____ (describe an event).

7. **PURPOSE** – the foreign corporation's purpose is to engage in any or all lawful business or affairs in which corporations may engage in the state or country under whose law the foreign corporation is incorporated, subject to the following limitations, *if any (leave this blank if there are no limitations on the corporation's purpose)*:

ARIZONA CORP. COMMISSION
FILED

MAR 1 4 2017

FILE NO. _____

8. CHARACTER OF BUSINESS – briefly describe the character of business or affairs the foreign corporation initially intends to conduct in Arizona. NOTE that the character of business or affairs that the foreign corporation ultimately conducts is not limited by the description provided.

DIGESTER, LAGOON & POND CLEANING - WASTEWATER TREATMENT PLANTS

9. PRINCIPAL OFFICE ADDRESS – FOREIGN DOMICILE STREET ADDRESS – see Instructions C0181 – give the physical or street address (not a P. O. Box) of the foreign corporation required to be maintained in its state or country of incorporation, or, if not so required, of the foreign corporation's statutory agent in its state or country of incorporation:			10. ARIZONA KNOWN PLACE OF BUSINESS ADDRESS Is the Arizona known place of business street address the same as the street address of the statutory agent? ☒ Yes - go to number 11 and continue. ☐ No - provide the Arizona physical or street address (not a P.O. Box) below:		
ATTENTION: VICKY PRINCE					
163 US HIGWAY 95 A					
City YERINGTON	NV State	89447 Zip	City	State	Zip

11. STATUTORY AGENT IN ARIZONA – see Instructions C0181	
11.1 REQUIRED – give the name (can be an individual or an entity) and physical or street address (not a P.O. Box) in Arizona of the statutory agent:	11.2 OPTIONAL – mailing address in Arizona of statutory agent (can be a P.O. Box):
Amanda Bacon	
10401 N. 33rd Avenue Apt 506	
City Phoenix AZ State 85051 Zip	City State Zip
11.3 REQUIRED – the Statutory Agent Acceptance form M002 must be submitted along with this Application For Authority.	

12. DIRECTORS – list the names and business address of each and every Director of the corporation. If more space is needed, check this box ☐ and complete and attach the Director Attachment form C0182.	
Jim G. Landers	
PO Box 826	
City YERINGTON State or Province NV Zip 89447	City State or Province Zip
Country	Country
Date taking office (optional):	Date taking office (optional):

Director Name	Director Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country / State or Province / Zip	City / Country / State or Province / Zip
Date taking office (optional):	Date taking office (optional):
Director Name	Director Name
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country / State or Province / Zip	City / Country / State or Province / Zip
Date taking office (optional):	Date taking office (optional):

19. OFFICERS - list the names and business addresses of all principal officers of the corporation. If more space is needed, check this box ☐ and complete and attach the Officer Attachment form CORS.

JIM G. LANDERS	VICKY PRINCE
Officer Name: PO BOX 826	Officer Name: PO BOX 826
Address 1	Address 1
Address 2 (optional): YERINGTON / NV / 89447	Address 2 (optional): YERINGTON / NV / 89447
City / Country: UNITED STATES / State or Province / Zip	City / Country: UNITED STATES / State or Province / Zip
Date taking office (optional): / Officer Title: President	Date taking office (optional): / Officer Title: Secretary
CAROLYN D. LANDERS	
Officer Name: PO BOX 826	Officer Name:
Address 1	Address 1
Address 2 (optional): YERINGTON / NV / 89447	Address 2 (optional):
City / Country: UNITED STATES / State or Province / Zip	City / Country: / State or Province / Zip
Date taking office (optional): / Officer Title: Treasurer	Date taking office (optional): / Officer Title:
Officer Name:	Officer Name:
Address 1	Address 1
Address 2 (optional)	Address 2 (optional)
City / Country / State or Province / Zip	City / Country / State or Province / Zip
Date taking office (optional): / Officer Title:	Date taking office (optional): / Officer Title:

14. FOR-PROFITS ONLY -- SHARES AUTHORIZED -- *see Instructions (2)(b)* -- list the class (common, preferred, etc.) and total number of shares the foreign corporation is AUTHORIZED to issue. This information must match the original Articles of Incorporation plus any amendments thereto. If more space is needed, check this box ☐ and complete and attach the Shares Authorized Attachment form CD87.

Class: Common Series: 1 thru 20 Totals: ϕ Par Value: ϕ

Class: _____ Series: _____ Totals: _____ Par Value: _____

15. FOR-PROFITS ONLY -- SHARES ISSUED -- *see Instructions (2)(b)* -- list each class/series of authorized shares and give the total number and par value of shares of that class that have been ISSUED. If no shares of that class have been issued, put the number zero. If more space is needed, check this box ☐ and complete and attach the Shares Issued Attachment form CD87.

Class: Common Series: 1 thru 20 Totals: ϕ Par Value: ϕ

Class: _____ Series: _____ Totals: _____ Par Value: _____

16. NONPROFITS ONLY -- MEMBERS -- check one box only:

Does the foreign nonprofit corporation have members? ☐ Yes ☐ No

17. PROFESSIONAL CORPORATIONS ONLY -- PROFESSIONAL SERVICES -- If "professional corporation" is checked in number 1, briefly describe the type of professional services the corporation will render (examples: accounting, medical, law firm):

_____

18. PROFESSIONAL CORPORATIONS ONLY -- PROFESSIONAL LICENSES:

By the signature appearing on this document, the foreign professional corporation certifies under penalty of perjury that at least one-half of its shareholders who are entitled to vote for the election of directors, and at least one-half of its directors, and its president, are licensed in one or more states to render a professional service described in the foreign professional corporation's articles of incorporation.

NOTE: You must attach a statement from the licensing authority in Arizona for the profession showing that at least one of the professional corporation's shareholders or employees is licensed in Arizona to render that professional service. (See A.R.S. § 10-2043.)

SIGNATURE: By checking the box marked "I accept" below, I acknowledge *under penalty of perjury* that this document together with any attachments is submitted in compliance with Arizona law.

☑ I ACCEPT

Carolyn D. Sanders — Carolyn D. Sanders — 08/09/2016

Signature — Printed Name — Date

SIGNATURE -- check only one:

☐ I am the Chairman of the Board of Directors of the corporation filing this document.	☒ I am a duly-authorized Officer of the corporation filing this document.	☐ I am a duly authorized bankruptcy trustee, receiver, or other court-appointed fiduciary for the corporation filing this document.

Filing Fee: $175.00 (regular processing) Expedited processing -- add $35.00 to filing fee. All fees are nonrefundable -- see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100

Please be advised that A.C.C. forms collect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.
All documents filed with the Arizona Corporation Commission are public record and are open for public inspection.
If you have questions after reading the instructions, please call 602-542-3026 or (outside Arizona only) 800-345-5819.

DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

STATUTORY AGENT ACCEPTANCE

Please read Instructions MUST!

1. **ENTITY NAME** – give the exact name in Arizona of the corporation or LLC that has appointed the Statutory Agent (this must match exactly the name as listed on the document appointing the statutory agent, e.g., Articles of Organization or Article of Incorporation):

   WasteWater Solids Management,INC ,

2. **STATUTORY AGENT NAME** – give the exact name of the Statutory Agent appointed by the entity listed in number 1 above (this will be *either* an individual or an entity). *NOTE* - the name must match exactly the statutory agent name as listed in the document that appoints the statutory agent (e.g. Articles of Incorporation or Articles of Organization), including any middle initial or suffix:

   Amanda Bacon

3. **STATUTORY AGENT SIGNATURE:**

   By the signature appearing below, the individual or entity named in number 2 above accepts the appointment as statutory agent for the entity named in number 1 above, and acknowledges that the appointment is effective until the appointing entity replaces the statutory agent or the statutory agent resigns, whichever occurs first.

   The person signing below declares and certifies *under penalty of perjury* that the information contained within this document together with any attachments is true and correct, and is submitted in compliance with Arizona law.

Signature	Amanda Bacon Printed Name	08/08/2016 Date

REQUIRED – check only one:

☒ **Individual as statutory agent:** I am signing on behalf of myself as the individual (natural person) named as statutory agent.	☐ **Entity as statutory agent:** I am signing on behalf of the entity named as statutory agent, and I am authorized to act for that entity.

Filing Fee: none (regular processing) Expedited processing – not applicable. All fees are nonrefundable – see Instructions.	Mail: Arizona Corporation Commission - Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.
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DO NOT WRITE ABOVE THIS LINE; RESERVED FOR ACC USE ONLY.

CERTIFICATE OF DISCLOSURE

Read the Instructions C003I

1. **ENTITY NAME** – give the exact name of the corporation in Arizona:

   WasteWater Solids Management, INC,

2. **A.C.C. FILE NUMBER** (if already incorporated or registered in AZ): _____
   Find the A.C.C. file number on the upper corner of filed documents OR on our website at: http://www.azcc.gov/Divisions/Corporations

3. **Check only one of the following to indicate the type of Certificate:**
   - ☒ Initial (accompanies formation or registration documents)
   - ☐ Annual (credit unions and loan companies only)
   - ☐ Supplemental to COD filed _____ (supplements a previously-filed Certificate of Disclosure)

4. **FELONY/JUDGMENT QUESTIONS:** Has any person (a) who is currently an officer, director, trustee, or incorporator, or (b) who controls or holds over ten per cent of the issued and outstanding common shares or ten per cent of any other proprietary, beneficial or membership interest in the corporation been:		
4.1 Convicted of a felony involving a transaction in securities, consumer fraud or antitrust in any state or federal jurisdiction within the five-year period (seven years for Nonprofits) immediately preceding the signing of this certificate?	☐ Yes	☒ No
4.2 Convicted of a felony, the essential elements of which consisted of fraud, misrepresentation, theft by false pretenses or restraint of trade or monopoly in any state or federal jurisdiction within the five-year period (seven years for Nonprofits) immediately preceding the signing of this certificate?	☐ Yes	☒ No
4.3 Subject to an injunction, judgment, decree or permanent order of any state or federal court entered within the five-year period (seven years for Nonprofits) immediately preceding the signing of this certificate, involving any of the following: a. The violation of fraud or registration provisions of the securities laws of that jurisdiction; b. The violation of the consumer fraud laws of that jurisdiction; c. The violation of the antitrust or restraint of trade laws of that jurisdiction?	☐ Yes	☒ No
4.4 If any of the answers to numbers 4.1, 4.2, or 4.3 are YES, you MUST complete and attach a Certificate of Disclosure Felony/Judgment Attachment form C004.		

5. BANKRUPTCY QUESTION:			
5.1	Has any person (a) who is currently an officer, director, trustee, incorporator, or (b) who controls or holds over twenty per cent of the issued and outstanding common shares or twenty per cent of any other proprietary, beneficial or membership interest in the corporation, served in any such capacity or held a twenty per cent interest in any other corporation (not the one filing this Certificate) on the bankruptcy or receivership of the other corporation?	☐ Yes	☒ No
5.2	If the answer to number 5.1 is YES, you MUST complete and attach a Certificate of Disclosure Bankruptcy Attachment form C005.		

IMPORTANT: If within 60 days of the delivery of this Certificate to the A.C.C. any person not included in this Certificate becomes an officer, director, trustee or person controlling or holding over ten per cent of the issued and outstanding shares or ten per cent of any other proprietary, beneficial or membership interest in the corporation, the corporation must submit a SUPPLEMENTAL Certificate providing information about that person, signed by all incorporators or by a duly elected and authorized officer.

SIGNATURE REQUIREMENTS:	
Initial Certificate of Disclosure:	This Certificate must be signed by all incorporators. If more space is needed, complete and attach an Incorporator Attachment form C084.
Foreign corporations:	This Certificate may be signed by a duly authorized officer or by the Chairman of the Board of Directors.
Credit Unions and Loan Companies:	This Certificate must be signed by any 2 officers or directors.

Jim G. Landers
Name
PO Box 826
Address 1

Address 2
Yerington | NV | 89447
City | State | Zip
Country: UNITED STATES

SIGNATURE – see Instructions C003:

By typing or entering my name and checking the box marked "I accept" below, I acknowledge *under penalty of perjury* that this document together with any attachments is submitted in compliance with Arizona law.

☒ I ACCEPT

[signature]
Signature
Jim G. Landers — [illegible]2016
Typed Name — Date

REQUIRED – check only one:

☐ Incorporator – I am an incorporator of the corporation submitting this Certificate.
☒ Officer – I am an officer of the corporation submitting this Certificate
☐ Chairman of the Board of Directors – I am the Chairman of the Board of Directors of the corporation submitting this Certificate.
☐ Director – I am a Director of the credit union or loan company submitting this Certificate.

Name

Address 1

Address 2

City | State | Zip
Country

SIGNATURE – see Instructions C003:

By typing or entering my name and checking the box marked "I accept" below, I acknowledge *under penalty of perjury* that this document together with any attachments is submitted in compliance with Arizona law.

☐ I ACCEPT

Signature

Printed Name — Date

REQUIRED – check only one:

☐ Incorporator – I am an incorporator of the corporation submitting this Certificate.
☐ Officer – I am an officer of the corporation submitting this Certificate
☐ Chairman of the Board of Directors – I am the Chairman of the Board of Directors of the corporation submitting this Certificate.
☐ Director – I am a Director of the credit union or loan company submitting this Certificate.

Filing Fee: None All fees are nonrefundable – see Instructions.	Mail: Arizona Corporation Commission – Corporate Filings Section 1300 W. Washington St., Phoenix, Arizona 85007 Fax: 602-542-4100

Please be advised that A.C.C. forms reflect only the minimum provisions required by statute. You should seek private legal counsel for those matters that may pertain to the individual needs of your business.
All documents filed with the Arizona Corporation Commission are public record and are open for public inspection.
If you have questions after reading the Instructions, please call [illegible] or (within Arizona only) [illegible].

SECRETARY OF STATE

STATE OF NEVADA

CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **WASTEWATER SOLIDS MANANGEMENT, INC.**, as a corporation duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 1, 2000, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on October 3, 2016.

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Electronic Certificate
Certificate Number: C20161003-0805
You may verify this electronic certificate online at https://www.nvsos.gov/

STATE OF NEVADA

BARBARA K. CEGAVSKE
Secretary of State

KIMBERLEY PERONDI
Deputy Secretary
for Commercial Recordings

OFFICE OF THE
SECRETARY OF STATE

Commercial Recordings Division
202 N. Carson Street
Carson City, NV 89701-4201
Telephone (775) 684-5708
Fax (775) 684-7138

VICKY PRINCE

NV

Job:C20161221-2655
December 21, 2016

Special Handling Instructions:
E-MAILED CORRECTION ON 12/21/2016 TLG FROM ORIGINAL JOB C20161020-1304
CCENTIRE

Charges

Description	Document Number	Filing Date/Time	Qty	Price	Amount
Entity Copies	00010501482-61		27	$0.00	$0.00
Copies - Certification of Document	00010501482-61		1	$0.00	$0.00
Total					$0.00

Payments

Type	Description	Amount
Total		$0.00

Credit Balance: $0.00

Job Contents:
NV Corp Certified Copy Request Cover Letter(s): 1

VICKY PRINCE

NV

STATE OF NEVADA

BARBARA K. CEGAVSKE
Secretary of State

KIMBERLEY PERONDI
Deputy Secretary
for Commercial Recordings

Commercial Recordings Division
202 N. Carson Street
Carson City, NV 89701-4201
Telephone (775) 684-5708
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OFFICE OF THE
SECRETARY OF STATE

VICKY PRINCE

NV

Job:C20161221-2655
December 21, 2016

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Total					$0.00

Payments

Type	Description	Amount
Total		$0.00

Credit Balance: $0.00

Job Contents:
NV Corp Certified Copy Request Cover 1
Letter(s):

VICKY PRINCE

NV

STATE OF NEVADA

BARBARA K. CEGAVSKE
Secretary of State

KIMBERLEY PERONDI
Deputy Secretary
for Commercial Recordings

Commercial Recordings Division
202 N. Carson Street
Carson City, NV 89701-4201
Telephone (775) 684-5708
Fax (775) 684-7138

OFFICE OF THE
SECRETARY OF STATE

Certified Copy

December 21, 2016

Job Number: C20161221-2655
Reference Number: 00010501482-61
Expedite:
Through Date:

The undersigned filing officer hereby certifies that the attached copies are true and exact copies of all requested statements and related subsequent documentation filed with the Secretary of State's Office, Commercial Recordings Division listed on the attached report.

Document Number(s)	Description	Number of Pages
C11966-2000-001	Articles of Incorporation	5 Pages/1 Copies
C11966-2000-005	Initial List	1 Pages/1 Copies
C11966-2000-006	Annual List	1 Pages/1 Copies
C11966-2000-004	Annual List	1 Pages/1 Copies
C11966-2000-003	Annual List	1 Pages/1 Copies
C11966-2000-002	Annual List	1 Pages/1 Copies
20050041955-21	Amended List	1 Pages/1 Copies
20050041957-43	Resignation of Officers	1 Pages/1 Copies
20050133949-96	Annual List	1 Pages/1 Copies
20060256697-63	Annual List	1 Pages/1 Copies
20060315647-24	Registered Agent Change	1 Pages/1 Copies
20070180850-41	Annual List	1 Pages/1 Copies
20070217450-98	Registered Agent Change	1 Pages/1 Copies
20080235130-24	Annual List	1 Pages/1 Copies
20090331694-97	Annual List	1 Pages/1 Copies
20100555102-11	Annual List	1 Pages/1 Copies
20110266748-07	Annual List	1 Pages/1 Copies
20120301907-15	Annual List	1 Pages/1 Copies
20130281236-78	Annual List	1 Pages/1 Copies
20130316871-12	Registered Agent Change	1 Pages/1 Copies
20140250736-90	Annual List	1 Pages/1 Copies
20150237161-88	Annual List	1 Pages/1 Copies
20160189925-13	Annual List	1 Pages/1 Copies

Respectfully,

Barbara K. Cegavske

BARBARA K. CEGAVSKE
Secretary of State

Certified By: Tracy Gillespie
Certificate Number: C20161221-2655
You may verify this certificate
online at http://www.nvsos.gov/

[redacted]

ARTICLES OF INCORPORATION

OF

WASTEWATER SOLIDS MANAGEMENT, INC.

ARTICLE I

The name of the corporation is: WASTEWATER SOLIDS MANAGEMENT, INC.

ARTICLE II

The principal office of this corporation is to be located in the City of Yerington, but this corporation may maintain an office in such room, office and place within and outside of the State of Nevada as the Board of Directors may from time to time determine, or as may be designated by the By-Laws of said corporation.

ARTICLE III

The corporation is formed to conduct any lawful business. The name and address of the original stockholders and directors are JIM G. LANDERS and STEPHEN D. LOONEY, 231 Highway 95A N., City of Yerington, State of Nevada.

ARTICLE IV

A. The amount of the total authorized capital stock of the corporation consists of 2,500 shares of stock of no par value. All such shares shall be of one class only, without preference or distinction.

B. Such stock may be issued from time to time without action by the stockholders for such consideration as may be fixed from time to time by the Board of Directors, and shares so issued, for consideration for which has been paid or delivered, shall be deemed fully paid in stock and the holders of such shares shall not be liable for any further payment thereon.

C. The capital stock of this corporation, after the amount of the subscription price or par value

has been paid in, shall not be subject to assessment to pay debts of the corporation and no paid up stock and no stock issued as fully paid shall ever be assessable or assessed and the Articles of Incorporation shall not be amended in this particular.

ARTICLE V

At all elections of directors, each holder of stock possessing voting power shall be entitled to as many votes as shall equal the number of his shares of stock multiplied by the number of directors to be elected and he may cast all of such votes for a single, or may distribute them among the number to be voted for and/or any two or more of them as he sees fit.

ARTICLE VI

The governing board of the corporation shall consist of three persons styled as directors. The Board of Director, who also constitutes the incorporator, is:

NAME	ADDRESS
IRA G. LANDERS President	251 Highway 95A N., Yerington, Nevada 89447
STEPHEN D. LOONEY Director	251 Highway 95A N., Yerington, Nevada 89447
JOAN T. JOHNSON Secretary/Treasurer	251 Highway 95A N., Yerington, Nevada 89447

ARTICLE VII

The corporation shall have authority to issue stock pursuant to Section 1244 of the Internal Revenue Code.

ARTICLE VIII

The initial Code of Bylaws of the Corporation shall be adopted by its Board of Directors. The

Code of Bylaws may contain any provisions for the regulation and management of the affairs of the Corporation not inconsistent with Chapter 78 of the Nevada Revised Statutes, or these Articles of Incorporation.

ARTICLE IX

The corporation reserves the right from time to time to amend, alter, or repeal any provision in its Articles of Incorporation in any manner now or hereafter prescribed by Chapter 78 of the Nevada Revised Statutes or any other applicable statute.

ARTICLE X

No Director or officer shall be liable to the Corporation or its shareholders for damages for breach of fiduciary duty as a Director or officer unless such liability arises from: (i) acts or omissions involving intentional misconduct, fraud or a knowing violation of law; or (ii) the payment of dividends in violation of Section 78.300 of the Nevada Revised Statutes. Any repeal or modification of this article by the shareholders of the corporation shall be prospective only, and shall not adversely affect any limitation on the personal liability of a Director or officer of the Corporation for acts or omissions prior to such repeal or modification.

ARTICLE XI

The Resident Agent of the Corporation is JOAN T. JOHNSON., 251 Highway 95A N., City of Yerington, County of Lyon, State of Nevada.

////

////

////

////

IN WITNESS WHEREOF, I have hereunto set my hand and seal and executed this instrument this 12 day of April, 2000.

[redacted]

STATE OF NEVADA)
) ss.
COUNTY OF CLARK)

On this 12th day of April, 2000, before me, the undersigned, a Notary Public in and for the County and State aforesaid, personally appeared JIM G. LANDERS, [redacted] LOONEY, and JOAN T. JOHNSON, known to me to be the persons whose names is subscribed to the foregoing instrument and who acknowledged that they executed the same freely, voluntarily and for the uses and purposes therein mentioned.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, the day and year first above written.

NOTARY PUBLIC

CHERI CRONELL
Notary Public, State of Nevada
[redacted]

[redacted]

IN THE MATTER OF WASTEWATER SOLIDS MANAGEMENT, INC., I, JOSEPH JOHNSON, with an address at 251 Highway 95A N, City of Yerington, County of Lyon, State of Nevada, hereby accept the appointment as Resident Agent of the above-named corporation in accordance with NRS 78.090.

FURTHERMORE, that the principal office in this state is located at 251 Highway 95A N, City of Yerington, County of Lyon, State of Nevada.

IN WITNESS WHEREOF, I have hereunto set my hand this ____ day of March, 2000.

JOSEPH JOHNSON
RESIDENT AGENT

INITIAL LIST OF OFFICERS, DIRECTORS AND RESIDENT AGENT OF

FILE NUMBER

WASTEWATER SOLIDS MANANGEMENT, INC. (Name of Corporation) — May 1, 2000 (Incorporation Date) — 11966-00

A Nevada (State of Incorporation) CORPORATION — FOR THE FILING PERIOD 5-1-00 TO 5-1-01

The Corporation's duly appointed Resident Agent in the State of Nevada upon whom process can be served is:

Joan T. Johnson
251 Highway 95A N.
Yerington, NV 89447

FOR OFFICE USE ONLY
FILED (DATE)

FILED
MAY 30 2000
Dean Heller
Secretary of State

PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Print or type names and addresses, either residence or business, for all officers and directors. A president, secretary, treasurer and at least one director must be named.
2. Have an officer sign the form. FORM WILL BE RETURNED IF UNSIGNED.
3. Return the completed form with the $85.00 filing fee. A $15.00 penalty must be added for failure to file this form by the 1st day of the 2nd month following incorporation date.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business per NRS 78.155. If you need the below attachment file stamped, enclose a self-addressed stamped envelope. To receive a certified copy, enclose a copy of this completed form, an additional $10.00 and appropriate instructions.
5. Return the completed form to: Secretary of State, 101 North Carson Street, Suite 3, Carson City, NV 89701-4786, (775) 684-5708

FILING FEE: $85.00 LATE PENALTY: $15.00

THIS FORM MUST BE FILED BY THE 1st DAY OF THE 2nd MONTH FOLLOWING INCORPORATION DATE

NAME	PO BOX	STREET ADDRESS	CITY	ST	ZIP	TITLE(S)
JIM G. LANDERS		251 Highway 95A N.	Yerington	NV	89447	PRESIDENT
JOAN T. JOHNSON		251 Highway 95A N.	Yerington	NV	89447	SECRETARY
						TREASURER
STEPHEN D. LOONEY		251 Highway 95A N.	Yerington	NV	89447	DIRECTOR
						DIRECTOR
						DIRECTOR

I hereby certify this initial list

X Signature of officer: Jim G Landers — Title(s): Pres — Date: 5/19/00

ANNUAL LIST OF OFFICERS, DIRECTORS, AND AGENTS

WASTEWATER SOLIDS MANAGEMENT, INC.

FILE NUMBER
11966-2000

FOR THE PERIOD MAY 2001 TO 2002. DUE BY MAY 31, 2001.

The Corporation's duly appointed resident agent in the State of Nevada upon whom process can be served is:

RA# 107202

FOR OFFICE USE ONLY
FILED (DATE)

FILED
APR 17 2001
Dean Heller
Secretary of State

JOAN T JOHNSON

251 HIGHWAY 95A
YERINGTON NV 89447

☐ IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT/ADDRESS FORM WILL BE SENT.

PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM

1. Include the names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer and all Directors must be named. There must be at least one director. Last year's information may have been preprinted. If you need to make changes, cross out the incorrect information and insert the new information above it. An officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
2. If there are additional directors, attach a list of them to this form.
3. Return the completed form with the $85.00 filing fee. A $15 penalty must be added for failure to file this form by the deadline. An annual list received more than 60 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business per NRS 76.155. If you need the below attachment file stamped, enclose a self-addressed stamped envelope. To receive a certified copy, enclose a copy of this completed form, an additional $10.00 and appropriate instructions.
5. Return the completed form to: Secretary of State, 101 North Carson Street, Suite 3, Carson City, NV 89701-4786. (775) 684-5708.

FILING FEE: $85.00 PENALTY: $15.00

NAME	TITLE(S)	P.O. BOX	STREET ADDRESS	CITY	ST.	ZIP
JIM G.LANDERS	PRESIDENT		251 HIGHWAY 95A N.	YERINGTON	NV	89447
JOAN T. JOHNSON	SECRETARY		251 HIGHWAY 95A N.	YERINGTON	NV	89447
	TREASURER					
	DIRECTOR					
	DIRECTOR					

I hereby certify this annual list.

X Signature of Officer Jim G Landers Date 4/4/01

ANNUAL LIST OF OFFICERS, DIRECTORS AND AGENTS OF

WASTEWATER SOLIDS MANANGEMENT, INC.

FILE NUMBER
11966-2000

FOR THE PERIOD MAY 2002 TO 2003. DUE BY MAY 31, 2002.

The Corporation's duly appointed resident agent in the State of Nevada upon whom process can be served is:

RA# 107202

JOAN T JOHNSON

251 HIGHWAY 95A
YERINGTON NV 89447

FOR OFFICE USE ONLY
FILED (DATE)

FILED #

APR 11 2002

IN THE OFFICE OF
DEAN HELLER, SECRETARY OF STATE

☐ IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT/ADDRESS FORM WILL BE SENT.

PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Include the names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer and all Directors must be named. There must be at least one director. Last year's information may have been preprinted. If you need to make changes, cross out the incorrect information and insert the new information above it. An officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
2. If there are additional directors, attach a list of them to this form.
3. Return the completed form with the $85.00 filing fee. A $50 penalty must be added for failure to file this form by the deadline. An annual list received more than 60 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business per NRS 78.155. If you need the below attachment file stamped, enclose a self-addressed stamped envelope. To receive a certified copy, enclose a copy of this completed form, an additional $20.00 and appropriate instructions.
5. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, NV 89701-4201, (775) 684-5708.

FILING FEE: $85.00 PENALTY: $50.00

NAME	TITLE(S)
JIM G.LANDERS	PRESIDENT
P.O. BOX / STREET ADDRESS: 251 HIGHWAY 95A N.	CITY: YERINGTON ST.: NV ZIP: 89447
NAME: JOAN T. JOHNSON	TITLE(S): SECRETARY
P.O. BOX / STREET ADDRESS: 251 HIGHWAY 95A N.	CITY: YERINGTON ST.: NV ZIP: 89447
NAME	TITLE(S): TREASURER
P.O. BOX / STREET ADDRESS	CITY ST. ZIP
NAME: STephen D Looney	TITLE(S): DIRECTOR
P.O. BOX / STREET ADDRESS: 617 N El Rio Dr.	CITY: Bakersfield ST. ZIP: 93309
NAME	TITLE(S): DIRECTOR
P.O. BOX / STREET ADDRESS	CITY ST. ZIP

I declare to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of chapter 364A of NRS.

X Signature of Officer

03/29/02
Date

ANNUAL LIST OF OFFICERS, DIRECTORS AND AGENTS OF:

WASTEWATER SOLIDS MANANGEMENT, INC.

FILE NUMBER
11966-2000

FOR THE PERIOD MAY 2003 TO 2004. DUE BY MAY 31, 2003.

The Corporation's duly appointed resident agent in the State of Nevada upon whom process can be served is:

RA# 107202

FOR OFFICE USE ONLY
FILED (DATE)

FILED
APR 0 8 2003
DEPUTY

JOAN T JOHNSON

251 HIGHWAY 95A
YERINGTON NV 89447

☐ IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT/ADDRESS FORM WILL BE SENT.

PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Include the names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer and all Directors must be named. There must be at least one director. Last year's information may have been preprinted. If you need to make changes, cross out the incorrect information and insert the new information above it. An officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
2. If there are additional directors, attach a list of them to this form.
3. Return the completed form with the $85.00 filing fee. A $30 penalty must be added for failure to file this form by the deadline. An annual list received more than 60 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business per NRS 78.155. If you need the below attachment file stamped, enclose a self-addressed stamped envelope. To receive a certified copy, enclose a copy of the completed form, an additional $20.00 and appropriate instructions.
5. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, NV 89701-4201, (775) 684-5708.

FILING FEE: $85.00 PENALTY: $30.00

NAME	TITLE(S)	P.O. BOX	STREET ADDRESS	CITY	ST.	ZIP
JIM G.LANDERS	PRESIDENT		251 HIGHWAY 95A N.	YERINGTON	NV	89447
JOAN T. JOHNSON	SECRETARY		251 HIGHWAY 95A N.	YERINGTON	NV	89447
	TREASURER					
	DIRECTOR					
	DIRECTOR					

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of chapter 364A of NRS.

X Signature of Officer Jim G. Landers Date 03/24/03

ANNUAL LIST OF OFFICERS, DIRECTORS AND AGENTS OF:

WASTEWATER SOLIDS MANANGEMENT, INC.

FILE NUMBER
11966-2000

FOR TI E PERIOD MAY 2004 TO 2005. DUE BY MAY 31, 2004.

The Corpora ion's duly appointed resident agent in the State of Nev da upon whom process can be served is:

RA# 107202

JOAN T JOHNSON

251 HIGHWAY 95A
YERINGTON NV 89447

FOR OFFICE USE ONLY
FILED (DATE)
FILING FEE: $125

FILED
MAY 1 3 2004
Dean Heller
Secretary of State

☐ IF THE ABI VE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT/ADDRESS FORM WILL BE SENT.

PLEASE READ I STRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Include the na ies and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. Last year's information may have been preprinted. If you need to make changes, cross out the incorrect information and insert the new informa ion above it. An officer must sign the form. FORMS WILL BE RETURNED IF UNSIGNED.
2. If there are addi ional directors, attach a list of them to this form.
3. Return the com leted form with the filing fee shown above. A $75 penalty must be added for failure to file this form by the deadline. An annual list received more than 60 days before its due d te shall be deemed an amended list for the previous year.
4. Make your chec payable to the Secretary of State. To receive a certified copy, enclose an additional $30.00 and appropriate instructions.
5. Return the com leted form to: Secretary of State, 202 N. Carson St., Carson City, NV 89701-4201. (775) 684-5708.
6. Form must be in he possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after d e date will be returned for additional fees and penalties.

FILING FEE - AS SHOWN ABOVE PENALTY $75.00

Check all that ap ly:

☐ This corpor ation is a publicly-traded corporation. If so, Central Index Key number is: _____

☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME	TITLE			
JIM G. LANDERS	PRESIDENT (OR EQUIVALENT OF)			
P.O. Box	ADDRESS	CITY	ST.	ZIP
	251 HIGHWAY 95A N.	YERINGTON	NV	89447
NAME	TITLE			
JOAN T. JOHNSON	SECRETARY (OR EQUIVALENT OF)			
P.O. Box	ADDRESS	CITY	ST.	ZIP
	251 HIGHWAY 95A N.	YERINGTON	NV	89447
NAME	TITLE			
	TREASURER (OR EQUIVALENT OF)			
P.O. Box	ADDRESS	CITY	ST.	ZIP
NAME	TITLE			
	DIRECTOR			
P.O. Box	ADDRESS	CITY	ST.	ZIP

I declare, to the best of my k owledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360.780 and acknowledge that I must to NRS 239.330, it i a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

Signature of Officer Jim G Landers Date 4/27/04

(Rev 05/03)

AMENDED
(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND RESIDENT AGENT OF

WASTEWATER SOLIDS MANAGEMENT, INC. (Name of Corporation) FILE NUMBER CI1966-00

FOR THE FILING PERIOD OF 02-2005 TO 05-2005

The corporation's duly appointed resident agent in the State of Nevada upon whom process can be served is:

Joan T. Johnson
251 Highway 95A N.
Yerington, NV 89447

☐ CHECK BOX IF YOU REQUIRE A FORM TO UPDATE YOUR RESIDENT AGENT INFORMATION

Filed in the office of	Document Number
Dean Heller Secretary of State State of Nevada	20050041955-21
	Filing Date and Time 02/10/2005 2:03 PM
	Entity Number C11966-2000

Important: Read instructions before completing and returning this form. THE ABOVE SPACE IS FOR OFFICE USE ONLY

1. Print or type name and address, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of each and all Directors must be named. Titles for officers may be omitted. [illegible]
2. If there are more than four officers and directors, a list of names may be attached to this form.
3. Return the completed form with the filing fee. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be returned as [illegible] for the previous year.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business per NRS 78.105. To receive a certified copy, [illegible] and applicable [illegible].
5. Submit the completed form to: Secretary of State, 202 North Carson Street, Carson City, NV 89701-4201, (775) 684-5708.
6. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

CHECK ONLY IF APPLICABLE:

☐ This corporation is a publicly traded corporation. The Central Index Key number is: [illegible]

☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME	TITLE(S)
Jim G. Landers	PRESIDENT (OR EQUIVALENT OF)
ADDRESS: 251 Highway 95A N.	CITY: Yerington, Nevada ST: [illegible] ZIP: 89447
NAME	TITLE(S)
Vicky Prince	SECRETARY (OR EQUIVALENT OF)
ADDRESS: 251 Highway 95A N.	CITY: Yerington, Nevada ST: [illegible] ZIP: 89447
NAME	TITLE(S)
Joan T. Johnson	TREASURER (OR EQUIVALENT OF)
ADDRESS: 251 Highwat 95A N.	CITY: Yerington, Nevada ST: [illegible] ZIP: 89447
NAME	TITLE(S)
	DIRECTOR
ADDRESS	CITY ST ZIP

I declare, to the best of my knowledge under penalty of perjury, that the above-referenced entity has complied with the provisions of NRS 360.780 and acknowledge that pursuant to NRS 225.350, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Signature of Officer Jim G. Landers Title Pres Date 2/8/05

Nevada Secretary of State Form ANNUAL LIST AMENDED 2003
Revised on: 10/15/03

DEAN HELLER
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684-5708
Website: secretaryofstate.biz

Filed in the office of	Document Number
Dean Heller Secretary of State State of Nevada	20050041957-43
	Filing Date and Time 02/10/2005 2:03 PM
	Entity Number C11966-2000

[redacted]

Important: Read attached instructions before completing form. ABOVE SPACE IS FOR OFFICE USE ONLY

Certificate of Resignation of Officer, Director, Manager, Member, General Partner, Trustee or Subscriber

1. Then name and title(s) of person that desires to resign:

Stephen D. Looney — Director

(Name) (Title(s))

2. The name and file number of the entity for which resignation is being made:

WASTEWATER SOLIDS MANAGEMENT, INC. — C11966-00

(Name of Entity) (File Number)

3. Signature:

4. Fee: $75.00 per entity.

This form must be accompanied by appropriate fees.

ANNUAL LIST OF OFFICERS, DIRECTORS AND AGENTS OF

WASTEWATER SOLIDS MANANGEMENT, INC.

FOR THE PERIOD MAY 2005 TO 2006. DUE BY MAY 31, 2005.

[redacted]

C11966-2000

The Corporation's duly appointed resident agent in the State of Nevada upon whom process can be served is:

JOAN T JOHNSON
251 HIGHWAY 95A
YERINGTON NV 89447

Filed in the office of	Document Number
Dean Heller	20050133949-96
Secretary of State	Filing Date and Time
State of Nevada	04/13/2005 1:30 PM
	Entity Number
	C11966-2000

FILING FEE: $125

☐ IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT/ADDRESS FORM WILL BE SENT.

THE ABOVE SPACE IS FOR OFFICE USE ONLY

PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Include the names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. Last year's information may have been preprinted. If you need to make changes, cross out the incorrect information and insert the new information above it. An officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
2. If there are additional directors, attach a list of them to this form.
3. Return the completed form with the filing fee shown above. A $75 penalty must be added for failure to file this form by the deadline. An annual list received more than 60 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. To receive a certified copy, enclose an additional $30.00 and appropriate instructions.
5. Return the completed form to: Secretary of State, 202 N. Carson St., Carson City, NV 89701-4201. (775) 684-5708.
6. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

FILING FEE - AS SHOWN ABOVE PENALTY: $75.00

Check all that apply:

☐ This corporation is a publicly-traded corporation. If so, Central Index Key number is: _____

☐ This publicly-traded corporation is not required to have a Central Index Key number.

NAME	TITLE(S)			
Jim G Landers	PRESIDENT (OR EQUIVALENT OF)			
JIM G. LANDERS				
P.O. BOX	ADDRESS	CITY	ST.	ZIP
251 HIGHWAY 95A N.		YERINGTON	NV	89447
Vicky Prince	SECRETARY (OR EQUIVALENT OF)			
JOAN T JOHNSON				
P.O. BOX	P.O. Box 430	Yachats	OR	97498
251 HIGHWAY 95A N.		YERINGTON	NV	89447
Joan T Johnson	TREASURER (OR EQUIVALENT OF)			
P.O. BOX 251 Hwy 95A N		Yerington	NV	89447
	DIRECTOR			
P.O. BOX	ADDRESS	CITY	ST.	ZIP

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360.780 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Signature of Officer Jim G. Landers Date 4/9/05

SLC0045 (REV 01/05)

ANNUAL LIST OF OFFICERS, DIRECTORS AND AGENTS OF

WASTEWATER SOLIDS MANANGEMENT, INC.
FOR THE PERIOD MAY 2006 TO 2007. DUE BY MAY 31, 2006.

C11966-2000

The Corporation's duly appointed resident agent in the State of Nevada upon whom process can be served is:

JOAN T JOHNSON
251 HIGHWAY 95A
YERINGTON NV 89447

Filed in the office of	Document Number
Dean Heller Secretary of State State of Nevada	20060256697-63
	Filing Date and Time 04/21/2006 10:50 AM
	Entity Number C11966-2000

FILING FEE: $125

☒ IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT/ADDRESS FORM WILL BE SENT.

THE ABOVE SPACE IS FOR OFFICE USE ONLY

PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Include the names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. Last year's information may have been preprinted. If you need to make changes, cross out the incorrect information and insert the new information above it. An officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
2. If there are additional directors, attach a list of them to this form.
3. Return the completed form with the filing fee shown above. A $75 penalty must be added for failure to file this form by the deadline. An annual list received more than 60 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. To receive a certified copy, enclose an additional $30.00 and appropriate instructions.
5. Return the completed form to: Secretary of State, 202 N. Carson St., Carson City, NV 89701-4201. (775) 684-5708.
6. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

FILING FEE - AS SHOWN ABOVE PENALTY: $75.00

Check all that apply:

☐ This corporation is a publicly-traded corporation. If so, Central Index Key number is: _____

☐ This publicly-traded corporation is not required to have a Central Index Key number.

NAME	TITLE(S)	P.O. BOX	ADDRESS	CITY	ST.	ZIP
JIM G LANDERS	PRESIDENT (OR EQUIVALENT OF)	~~826~~	~~251 HIGHWAY 95A N~~	YERINGTON	NV	89447
VICKY PRINCE	SECRETARY (OR EQUIVALENT OF)	~~826~~	~~251 HIGHWAY 95A N~~	YERINGTON	NV	89447
JOAN T JOHNSON	TREASURER (OR EQUIVALENT OF)		251 HIGHWAY 95A N	YERTINGTON	NV	89447
	DIRECTOR					

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360.780 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Signature of Officer Jim G Landers Pres Date 4/20/06

DICRSAS (Rev 01/05)

DEAN HELLER
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684 5708
Website: secretaryofstate.biz

Certificate of Change of Resident Agent and/or Location of Registered Office

Filed in the office of	Document Number
Dean Heller	20060315647-24
Secretary of State	Filing Date and Time
State of Nevada	05/17/2006 8:48 AM
	Entity Number
	C11966-2000

General instructions for this form:

1. Please print legibly or type; Black Ink Only.
2. Complete all fields.
3. The Physical Nevada address of the resident agent must be set forth; PMB's are not acceptable.
4. Ensure that document is signed in signature fields.
5. Include the filing fee of $60.00.

ABOVE SPACE IS FOR OFFICE USE ONLY

Name of Entity: Wastewater Solids Mgmt, Inc

File Number: C11966-2000

The change below is effective upon the filing of this document with the Secretary of State.

Doc #2006025 6697-63

Reason for change: (check one) ☒ Change of Resident Agent ☒ Change of Location of Registered Office

The former resident agent and/or location of the registered office was:

Resident Agent: JOAN T JOHNSON

Street No.: 251 Highway 95A

City, State, Zip: YERINGTON NV 89447

The resident agent and/or location of the registered office is changed to:

Resident Agent: CAROLYN D. LAIR

Street No.: 40 AMANET WAY,

City, State, Zip: YERINGTON NV 89447

Optional Mailing Address: P.O Box 826 YERINGTON NV 89447

NOTE: For an entity to file this certificate, the signature of one officer is required.

x _____ Pres
Signature/Title

Certificate of Acceptance of Appointment by Resident Agent

I hereby accept the appointment as Resident Agent for the above-named business entity.

x _____
Authorized Signature of R.A. or On Behalf of R.A. Company

May 15, 2006
Date

This form must be accompanied by appropriate fees.

ANNUAL LIST OF OFFICERS, DIRECTORS AND AGENTS OF:

WASTEWATER SOLIDS MANAGEMENT, INC.
FOR THE PERIOD MAY 2007 TO 2008. DUE BY MAY 31, 2007.

C11966-2000

The Corporation's duly appointed resident agent in the State of Nevada upon whom process can be served is:

CAROLYN D ~~LATK~~ Landers
PO BOX 826
YERINGTON NV 89447

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20070180850-41
	Filing Date and Time 03/13/2007 7:31 AM
	Entity Number C11966-2000

** PLEASE NOTE: YOU MAY NOW FILE YOUR ANNUAL LIST ONLINE AT WWW.SECRETARYOFSTATE.BIZ **

FILING FEE: $125

☒ IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT/ADDRESS FORM WILL BE SENT.

THE ABOVE SPACE IS FOR OFFICE USE ONLY

PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Include the names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. Last year's information may have been preprinted. If you need to make changes, cross out the incorrect information and insert the new information above it. An officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
2. If there are additional directors, attach a list of them to this form.
3. Return the completed form with the filing fee shown above. A $75 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. To receive a certified copy, enclose an additional $30.00 and appropriate instructions.
5. Return the completed form to: Secretary of State, 202 N. Carson St., Carson City, NV 89701-4201. (775) 684-5708.
6. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

FILING FEE - AS SHOWN ABOVE PENALTY: $75.00

Check all that apply:

☐ This corporation is a publicly-traded corporation. If so, Central Index Key number is: _____

☐ This publicly-traded corporation is not required to have a Central Index Key number.

NAME	TITLE(S)	P.O. BOX	ADDRESS	CITY	ST.	ZIP
JIM G LANDERS	PRESIDENT (OR EQUIVALENT OF)	PO BOX 826		YERINGTON	NV	89447
VICKY PRINCE	SECRETARY (OR EQUIVALENT OF)	PO BOX 826		YERINGTON	NV	89447
~~JOHN E JOHNSON~~ Carolyn D. Landers	TREASURER (OR EQUIVALENT OF)	~~251 HIGHWAY 95A N~~ P.O. Box 826		~~YERINGTON~~ Yerington	~~NV~~ NV	~~89447~~ 89447
	DIRECTOR					

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360.780 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

Carolyn D Landers — 3/10/07

X Signature of Officer — Date

SIGSAR (Rev 12/97)

ROSS MILLER
Secretary of State
202 North Carson Street
Carson City, Nevada 89701- 4201
(775) 684-5708
Website: secretaryofstate.biz

Certificate of Change of Resident Agent and/or Location of Registered Office

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20070217450-98
	Filing Date and Time 03/27/2007 8:11 AM
	Entity Number C11966-2000

General Instructions for this form:

1. Please print legibly or type; Black Ink Only.
2. Complete all fields.
3. The Physical Nevada address of the resident agent must be set forth; PMB's are not acceptable.
4. Ensure that document is signed in signature fields.
5. Include the filing fee of $60.00.

ABOVE SPACE IS FOR OFFICE USE ONLY

Wastewater Solids Management, INC — Name of Entity

C11966-2000 — File Number

The change below is effective upon the filing of this document with the Secretary of State.

Reason for change: (check one) [X] Change of Resident Agent [X] Change of Location of Registered Office

The former resident agent and/or location of the registered office was:

Resident Agent: Carolyn D Lamb
Street Number: 40 Bonanza Way — P.O Box 826
City, State, Zip: Yerington NV 89447

The resident agent and/or location of the registered office is changed to:

Resident Agent: Carolyn D Landers
Street Number: 40 Bonanza Way — PO Box 826
City, State, Zip: Yerington NV 89447
Optional Mailing Address: P.O. Box 826 Yerington NV 89447

NOTE: For an entity to file this certificate, the signature of one officer is required.

x Jerry Landers Pres
Signature / Title

Certificate of Acceptance of Appointment by Resident Agent

I hereby accept the appointment as Resident Agent for the above-named business entity.

x Carolyn D Landers — 3/26/07
Authorized Signature of R.A. or On Behalf of R.A. Company — Date

This form must be accompanied by appropriate fees.

Nevada Secretary of State R.A. Change 2000
Revised on 10/1/705

ANNUAL LIST OF OFFICERS, DIRECTORS AND AGENTS OF

WASTEWATER SOLIDS MANANGEMENT, INC.

FOR THE PERIOD MAY 2008 TO 2009. DUE BY MAY 31, 2008.

C11966-2000

The Corporation's duly appointed resident agent in the State of Nevada upon whom process can be served is:

CAROLYN D LANDERS
PO BOX 826
YERINGTON NV 89447

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20080235130-24
	Filing Date and Time 04/01/2008 9:48 AM
	Entry Number C11966-2000

** PLEASE NOTE: YOU MAY NOW FILE YOUR ANNUAL LIST ONLINE AT WWW.SECRETARYOFSTATE.BIZ **

FILING FEE: $125

☐ IF THE ABOVE INFORMATION IS INCORRECT, PLEASE CHECK THIS BOX AND A CHANGE OF RESIDENT AGENT/ADDRESS FORM WILL BE SENT.

THE ABOVE SPACE IS FOR OFFICE USE ONLY

PLEASE READ INSTRUCTIONS BEFORE COMPLETING AND RETURNING THIS FORM.

1. Include the names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. Last year's information may have been preprinted. If you need to make changes, cross out the incorrect information and insert the new information above it. An officer must sign the form. FORM WILL BE RETURNED IF UNSIGNED.
2. If there are additional directors, attach a list of them to this form.
3. Return the completed form with the filing fee shown above. A $75 penalty must be added for failure to file this form by the deadline. An annual list received more than 60 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. To receive a certified copy, enclose an additional $30.00 and appropriate instructions.
5. Return the completed form to: Secretary of State, 202 N. Carson St., Carson City, NV 89701-4201. (775) 684-5708.
6. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

FILING FEE - AS SHOWN ABOVE PENALTY: $75.00

Check all that apply:

☐ This corporation is a publicly-traded corporation. If so, Central Index Key number is: _____

☐ This publicly-traded corporation is not required to have a Central Index Key number.

NAME: Jim G Landers — TITLE(S): PRESIDENT (OR EQUIVALENT OF)
JIM G LANDERS
P.O. BOX / ADDRESS / CITY / ST. / ZIP
PO BOX 826 — YERINGTON — NV — 89447

NAME: — TITLE(S): SECRETARY (OR EQUIVALENT OF)
VICKY PRINCE
P.O. BOX / ADDRESS / CITY / ST. / ZIP
PO BOX 826 — YERINGTON — NV — 89447

NAME: — TITLE(S): TREASURER (OR EQUIVALENT OF)
CAROLYN D LANDERS
P.O. BOX / ADDRESS / CITY / ST. / ZIP
PO BOX 826 — YERINGTON — NV — 89447

NAME: — TITLE(S): DIRECTOR
P.O. BOX / ADDRESS / CITY / ST. / ZIP

declare, to the best of my knowledge under penalty of perjury, that the above-mentioned entity has complied with the provisions of NRS 368.700 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

Carolyn D Landers Treasurer 3/31/08

* Signature of Officer — DATE

(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT OF

FILE NUMBER: C11966-2000

NAME OF CORPORATION: Waste Water Solids Management INC

FOR THE FILING PERIOD OF: May 2009 TO: May 2010

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

A FORM TO CHANGE REGISTERED AGENT INFORMATION CAN BE FOUND ON OUR WEBSITE: www.nvsos.gov

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20090331694-97
	Filing Date and Time 04/06/2009 8:44 AM
	Entity Number C11966-2000

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

☒ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

****YOU MAY NOW FILE YOUR ANNUAL LIST ONLINE AT www.nvsos.gov****

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
2. If there are additional officers, attach a list of them to this form.
3. Return the complete form with the filing fee. Fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. Make your check payable to the Secretary of State. Your canceled check will constitute a certificate to transact business.
5. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
6. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
7. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties.

CHECK ONLY IF APPLICABLE

☐ This corporation is a publicly traded corporation. The Central Index Key number is:

☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME	TITLE(S)	ADDRESS	CITY	STATE	ZIP CODE
Jim G. Landers	PRESIDENT (OR EQUIVALENT OF)	PO Box 826	Yerington	NV	89447
Vicky Prince	SECRETARY (OR EQUIVALENT OF)	PO Box 826	Yerington	NV	89447
Carolyn D. Landers	TREASURER (OR EQUIVALENT OF)	PO Box 826	Yerington	NV	89447
	DIRECTOR				

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS 360.780 and acknowledge that pursuant to NRS 239.330 it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Jim G. Landers — Title: President — Date:

Signature of Officer

Nevada Secretary of State Annual List Profit
Revised: 7-1-08

(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

Wastewater Solids Management CO INC
NAME OF CORPORATION

FILE NUMBER
C-11966-2000

FOR THE FILING PERIOD OF 05/10 TO 05/11

"YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov"

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.nvsos.gov

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20100555102-11
	Filing Date and Time 07/21/2010 8:59 AM
	Entity Number C11966-2000

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

☒ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
2. If there are additional officers, attach a list of them to this form.
3. Return the complete form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is $200.00. Effective 2/1/2010, $100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Certified Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

CHECK ONLY IF APPLICABLE

☐ Pursuant to NRS, this entity is exempt from the business license fee. Exemption code:

☒ Month and year your State Business License expires: 05 20 10

☐ This corporation is a publicly traded corporation. The Central Index Key number is:

☐ This publicly traded corporation is not required to have a Central Index Key number.

Section 7(2) Exemption Codes
001 - Governmental Entity
002 - 501(c) Nonprofit Entity
003 - Home-based Business
005 - Motion Picture Company
006 - NRS 680B.020 Insurance Co.

NAME	TITLE(S)	
Jim G. Landers	PRESIDENT (OR EQUIVALENT OF)	
ADDRESS	CITY	STATE ZIP CODE
PO Box 826	Yerington	NV 89447
NAME	TITLE(S)	
Vicky Prince	SECRETARY (OR EQUIVALENT OF)	
ADDRESS	CITY	STATE ZIP CODE
PO Box 826	Yerington	NV 89447
NAME CT	TITLE(S)	
Carolyn D. Landers	TREASURER (OR EQUIVALENT OF)	
ADDRESS	CITY	STATE ZIP CODE
PO Box 826	Yerington	NV 89447
NAME	TITLE(S)	
	DIRECTOR	
ADDRESS	CITY	STATE ZIP CODE

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of sections 6 to 16 of AB 146 of the 2009 session of the Nevada Legislature and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Carolyn D Landers — Title TREASURER — Date 7/21/10

Signature of Officer

Nevada Secretary of State Annual List Profit
Revised: 11-9-09

(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

FILE NUMBER C11966-2000

Waste Water Solids Management INC
NAME OF CORPORATION

FOR THE FILING PERIOD OF 05-01-2011 TO 05-31-2012

YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

Carolyn D. Landers
PO Box 826
Yerington, NV 89447

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.nvsos.gov

Filed in the office of
Ross Miller
Secretary of State
State of Nevada

Document Number: 20110266748-07
Filing Date and Time: 04/08/2011 8:59 AM
Entity Number: C11966-2000

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

☒ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is $200.00. Effective 2/1/2010, $100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

CHECK ONLY IF APPLICABLE

☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: ____

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ____

☐ This publicly traded corporation is not required to have a Central Index Key number.

NRS 76.020 Exemption Codes
001 - Governmental Entity
003 - Home-based Business
005 - Motion Picture Company
006 - NRS 680B.020 Insurance Co.

NAME	TITLE(S)			
Jim G. Landers	PRESIDENT (OR EQUIVALENT OF)			
ADDRESS	CITY	STATE	ZIP CODE	
PO Box 826	Yerington	NV	89447	
NAME	TITLE(S)			
Vicky Prince	SECRETARY (OR EQUIVALENT OF)			
ADDRESS	CITY	STATE	ZIP CODE	
PO Box 826	Yerington	NV	89447	
NAME	TITLE(S)			
Carolyn D. Landers	TREASURER (OR EQUIVALENT OF)			
ADDRESS	CITY	STATE	ZIP CODE	
PO Box 826	Yerington	NV	89447	
NAME	TITLE(S)			
	DIRECTOR			
ADDRESS	CITY	STATE	ZIP CODE	

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Jim G. Landers
Signature of Officer

Title: President

Date: 04/05/11

Nevada Secretary of State Annual List Profit
Revised: 10-8-10

(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

FILE NUMBER

Wastewater Solids Management INC — C-11966-2000

NAME OF CORPORATION

FOR THE FILING PERIOD OF 5-1-2012 TO 5-31-2013

"YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov"

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

Carolyn Landers
40 Amanet Way
Yerington NV 89447

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.nvsos.gov

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20120301907-15
	Filing Date and Time 04/27/2012 6:01 AM
	Entity Number C11966-2000

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

☒ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is $200.00. Effective 2/1/2010, $100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: ____

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

NRS 76.020 Exemption Codes
001 - Governmental Entity
005 - Motion Picture Company
006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is: ____

☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME	TITLE(S)	
Jim G. LANDERS	PRESIDENT (OR EQUIVALENT OF)	
ADDRESS	CITY	STATE / ZIP CODE
PO Box 826	Yerington	NV 89447
NAME	TITLE(S)	
Vicky PRINCE	SECRETARY (OR EQUIVALENT OF)	
ADDRESS	CITY	STATE / ZIP CODE
PO Box 826	YERINGTON	NV 89447
NAME	TITLE(S)	
CAROLYN D. LANDERS	TREASURER (OR EQUIVALENT OF)	
ADDRESS	CITY	STATE / ZIP CODE
PO Box 826	YERINGTON	NV 89447
NAME	TITLE(S)	
	DIRECTOR	
ADDRESS	CITY	STATE / ZIP CODE

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 78 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Carolyn Landers — Title: TREASURER — Date: 4/27/12

Signature of Officer

Nevada Secretary of State Annual List Profit
Revised 3-9-12

(PROFIT) ANNUAL LIST OF OFFICERS, DIRECTORS, AND REGISTERED AGENT AND STATE BUSINESS LICENSE APPLICATION OF:

FILE NUMBER

WasteWater Solids MANAgement INC
NAME OF CORPORATION

FOR THE FILING PERIOD OF 5/1/13 TO 5/31/14

YOU MAY FILE THIS FORM ONLINE AT www.nvsos.gov

The entity's duly appointed registered agent in the State of Nevada upon whom process can be served is:

MARK ARRIGHI
PO BOX 1457
YERINGTON NV 89447

A FORM TO CHANGE REGISTERED AGENT INFORMATION IS FOUND AT: www.nvsos.gov

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20130281236-78
	Filing Date and Time 04/26/2013 5:48 AM
	Entity Number C11966-2000

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

[X] Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is $200.00. Effective 2/1/2010, $100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

[ ] Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: [ ]

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

[ ] This corporation is a publicly traded corporation. The Central Index Key number is: [ ]

[ ] This publicly traded corporation is not required to have a Central Index Key number.

NRS 76.020 Exemption Codes
001 - Governmental Entity
005 - Motion Picture Company
006 - NRS 680B.020 Insurance Co.

NAME	TITLE(S)	CITY	STATE	ZIP CODE
Jim G. Landers	PRESIDENT (OR EQUIVALENT OF)			
ADDRESS: PO Box 826		YERINGTON	NV	89447
NAME: Vicky Prince	TITLE(S): SECRETARY (OR EQUIVALENT OF)			
ADDRESS: PO Box 826		YERINGTON	NV	89447
NAME: Carolyn D. Landers	TITLE(S): TREASURER (OR EQUIVALENT OF)			
ADDRESS: PO Box 826		Yerington	NV	89447
NAME	TITLE(S): DIRECTOR			
ADDRESS		CITY	STATE	ZIP CODE

I declare, to the best of my knowledge under penalty of perjury, that the above mentioned entity has complied with the provisions of NRS Chapter 76 and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Carolyn Landers — Title: TREASURER — Date: 4/26/13

Signature of Officer

Nevada Secretary of State Annual List Profit
Revised 3-6-12

ROSS MILLER
Secretary of State
202 North Carson Street
Carson City, Nevada 89701-4201
(775) 684-5708
Website: www.nvsos.gov

181002

Statement of Change of Registered Agent by Represented Entity

(PURSUANT TO NRS 77.340)

This form may be submitted by: the Represented Entity to appoint a new Registered Agent or amend own service of process info. For more information please visit http://www.nvsos.gov/index.aspx?page=141

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20130316871-12
	Filing Date and Time 05/10/2013 8:44 AM
	Entity Number C11966-2000

USE BLACK INK ONLY - DO NOT HIGHLIGHT

ABOVE SPACE IS FOR OFFICE USE ONLY

1. Name of Represented Entity:
WASTEWATER SOLIDS MANAGEMENT INC.

2. Entity File Number: C-11966-2000

3. This statement of change will have the following effect: (check only one)

☒ Appoints a new agent for service of process (complete 4a or 4b)

☐ Updates contact information of the Represented Entity acting as own agent (complete 4c)

4. Information in effect upon the filing of this statement: (complete only one section)

a) Commercial Registered Agent:

Name

b) Noncommercial Registered Agent:

MARK AIRIGHI
Name

14 South Main St — Yerington — Nevada — 89447
Street Address — City — Zip Code

PO Box #457 — Yerington — Nevada — 89447
Mailing Address (if different from street address) — City — Zip Code

c) Title of Office or Other Position within Represented Entity:

Name of Title or Position

Street Address — City — Nevada — Zip Code

Mailing Address (if different from street address) — City — Nevada — Zip Code

5. Signature of Represented Entity: (required)

X [signature] Treasurer — 4/24/13
Authorized Signature — Date

6. Registered Agent Acceptance: (required)

I hereby accept appointment as Registered Agent for the above named Entity.

X [signature] — 5/7/13
Authorized Signature of Registered Agent or On Behalf of Registered Agent Entity — Date

FEE: $60.00

This form must be accompanied by appropriate fees.

(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

ENTITY NUMBER
C11966-2000

WasteWater Solids Management INC
NAME OF CORPORATION

FOR THE FILING PERIOD OF 05/2014 TO 05/2015

USE BLACK INK ONLY - DO NOT HIGHLIGHT

"YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov"

Filed in the office of	Document Number
Ross Miller Secretary of State State of Nevada	20140250736-90
	Filing Date and Time 04/03/2014 8:06 AM
	Entity Number C11966-2000

ABOVE SPACE IS FOR OFFICE USE ONLY

☒ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is $200.00. Effective 2/1/2010, $100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Certified Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

CHECK ONLY IF APPLICABLE AND ENTER EXEMPTION CODE IN BOX BELOW

☐ Pursuant to NRS Chapter 76, this entity is exempt from the business license fee. Exemption code: ☐

NOTE: If claiming an exemption, a notarized Declaration of Eligibility form must be attached. Failure to attach the Declaration of Eligibility form will result in rejection, which could result in late fees.

NRS 76.020 Exemption Codes
001 - Governmental Entity
005 - Motion Picture Company
006 - NRS 680B.020 Insurance Co.

☐ This corporation is a publicly traded corporation. The Central Index Key number is:

☐ This publicly traded corporation is not required to have a Central Index Key number.

NAME	TITLE(S)		
Jim G. Landers	PRESIDENT (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO Box 826	Yerington	NV	89447
NAME	TITLE(S)		
Vicky Prince	SECRETARY (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO Box 826	Yerington	NV	89447
NAME	TITLE(S)		
Carolyn D. Landers	TREASURER (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO Box 826	Yerington	NV	89447
NAME	TITLE(S)		
	DIRECTOR		
ADDRESS	CITY	STATE	ZIP CODE

None of the officers or directors identified in the list of officers has been identified with the fraudulent intent of concealing the identity of any person or persons exercising the power or authority of an officer or director in furtherance of any unlawful conduct.

I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X Carolyn D. Landers
Signature of Officer or
Other Authorized Signature

Title: Treasurer

Date: 04/01/2014

Nevada Secretary of State List Profit
Revised 7-31-13

(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

ENTITY NUMBER

WASTEWATER SOLIDS MANANGEMENT, INC. | C11966-2000

NAME OF CORPORATION

FOR THE FILING PERIOD OF MAY, 2015 TO MAY, 2016

100102

USE BLACK INK ONLY - DO NOT HIGHLIGHT

"YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov"

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

Filed in the office of	Document Number
Barbara K. Cegavske	20150237161-88
Secretary of State	Filing Date and Time
State of Nevada	05/27/2015 10:35 AM
	Entity Number
	C11966-2000

ABOVE SPACE IS FOR OFFICE USE ONLY

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
2. If there are additional officers, attach a list of them to this form.
3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is $200.00. Effective 2/1/2010, $100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
7. Return the completed form to: Secretary of State, 202 North Carson Street, Carson City, Nevada 89701-4201, (775) 684-5708.
8. Form must be in the possession of the Secretary of State on or before the last day of the month in which it is due. (Postmark date is not accepted as receipt date.) Forms received after due date will be returned for additional fees and penalties. Failure to include annual list and business license fees will result in rejection of filing.

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NAME	TITLE(S)		
JIM G LANDERS	PRESIDENT (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO BOX 826 , USA	YERINGTON	NV	89447
NAME	TITLE(S)		
VICKY PRINCE	SECRETARY (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO BOX 826 , USA	YERINGTON	NV	89447
NAME	TITLE(S)		
CAROLYN D LANDERS	TREASURER (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO BOX 826 , USA	YERINGTON	NV	89447
NAME	TITLE(S)		
JIM G LANDERS	DIRECTOR		
ADDRESS	CITY	STATE	ZIP CODE
PO BOX 826 , USA	YERINGTON	NV	89447

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X VICKY PRINCE

Signature of Officer or Other Authorized Signature

Title: CORPORATE SECRETARY

Date: 5/27/2015 10:35:26 AM

Nevada Secretary of State List Profit
Revised: 1-5-15

(PROFIT) INITIAL/ANNUAL LIST OF OFFICERS, DIRECTORS AND STATE BUSINESS LICENSE APPLICATION OF:

ENTITY NUMBER

WASTEWATER SOLIDS MANANGEMENT, INC. | C11966-2000

NAME OF CORPORATION

FOR THE FILING PERIOD OF MAY, 2016 TO MAY, 2017

160103

USE BLACK INK ONLY - DO NOT HIGHLIGHT

"YOU MAY FILE THIS FORM ONLINE AT www.nvsilverflume.gov"

☐ Return one file stamped copy. (If filing not accompanied by order instructions, file stamped copy will be sent to registered agent.)

Filed in the office of	Document Number
Barbara K. Cegavske	20160189925-13
Secretary of State	Filing Date and Time
State of Nevada	04/27/2016 5:09 PM
	Entity Number
	C11966-2000

ABOVE SPACE IS FOR OFFICE USE ONLY

IMPORTANT: Read instructions before completing and returning this form.

1. Print or type names and addresses, either residence or business, for all officers and directors. A President, Secretary, Treasurer, or equivalent of and all Directors must be named. There must be at least one director. An Officer must sign the form. *FORM WILL BE RETURNED IF UNSIGNED.*
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3. Return the completed form with the filing fee. Annual list fee is based upon the current total authorized stock as explained in the Annual List Fee Schedule For Profit Corporations. A $75.00 penalty must be added for failure to file this form by the deadline. An annual list received more than 90 days before its due date shall be deemed an amended list for the previous year.
4. State business license fee is $500.00/$200.00 for Professional Corporations filed pursuant to NRS Chapter 89. Effective 2/1/2016, $100.00 must be added for failure to file form by deadline.
5. Make your check payable to the Secretary of State.
6. Ordering Copies: If requested above, one file stamped copy will be returned at no additional charge. To receive a certified copy, enclose an additional $30.00 per certification. A copy fee of $2.00 per page is required for each additional copy generated when ordering 2 or more file stamped or certified copies. Appropriate instructions must accompany your order.
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JIM G LANDERS	PRESIDENT (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO BOX 826 , USA	YERINGTON	NV	89447
NAME	TITLE(S)		
VICKY PRINCE	SECRETARY (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO BOX 826 , USA	YERINGTON	NV	89447
NAME	TITLE(S)		
CAROLYN D LANDERS	TREASURER (OR EQUIVALENT OF)		
ADDRESS	CITY	STATE	ZIP CODE
PO BOX 826 , USA	YERINGTON	NV	89447
NAME	TITLE(S)		
JIM G LANDERS	DIRECTOR		
ADDRESS	CITY	STATE	ZIP CODE
PO BOX 826 , USA	YERINGTON	NV	89447

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I declare, to the best of my knowledge under penalty of perjury, that the information contained herein is correct and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State.

X VICTORIA E PRINCE

Signature of Officer or Other Authorized Signature

Title: CORPORATE SECRETARY

Date: 4/27/2016 5:09:49 PM

WASTEWATER SOLIDS MANAGEMENT CO.
FOR OUR ENVIRONMENT

RECEIVED
MAR 1 4 2017
ARIZONA CORP. COMMISSION
CORPORATIONS DIVISION

COVER SHEET
Resubmission File # F-2124227-8

March 14, 2017

From: WasteWater Solids Management INC
PO Box 826
Yerington, NV 89447

RE: **Resubmission for File # F-2124227-8**

To Whom It May Concern:

All corrections listed on your rejection letter dated 3/7/2016 (also attached) have been fulfilled. All requested information has been completed.

If there are any questions/concerns, I can be reached via cell phone doing normal business hours at (916) 425-2322. My email address is ap@wastewatermanagement.com

Sincerely,
Carolyn D. Landers, Treasurer
WasteWater Solids Management, INC.

ARIZONA CORPORATION COMMISSION

WASTEWATER SOLIDS MANAGEMENT, INC
AMANDA BACON
10401 N 33RD AVE #506

PHOENIX, AZ 85051

Effective Date: 03/07/2017
File No: F-2124227-8

We have received a document submission for the above-referenced entity. If an acceptable form of payment for the correct filing fee was received, it has been deposited and is nonrefundable pursuant to statute, unless otherwise noted below. The document is **REJECTED** and is being returned for the following reasons:

Pursuant to A.R.S 10-1503 & 10-11503, indicate the number of shares the corporation has authority to issue, itemized by classes, par value of shares, shares without par value and series, if any with a class. Cannot be zero or N/A.

The entity name must be consistent with certificate of existence.

IMPORTANT INFORMATION:

Follow the instructions below to resubmit your document. If you originally paid for expedited processing, the resubmitted document will be processed within the current posted expedited time frame after we receive the resubmission, and no additional fees are owed. If you originally paid for regular processing time, the resubmitted document will be processed within the current posted regular time frame after we receive the resubmission, and no additional fees are owed. If you want to upgrade from regular processing to expedited processing, then you can pay the $35.00 expedite fee when you resubmit the document.

Please Note: Companies must return the corrected document within thirty (30) calendar days of the rejection date to retain the original file date.

Return the following information to the Corporations Division (all pages must be legible):

1. A copy of this letter;
2. All pages of the rejected document with corrections OR a complete, signed, corrected document;
3. A NEW cover sheet indicating resubmission; and

4. Any additional paperwork or filing fees, as requested within this letter.

If you do not owe any additional fees or are paying by MOD account you can email your resubmission packet as a pdf document attachment to documentintake@azcc.gov.

If you have any questions, please feel free to contact the Customer Service Call Center at 602-542-3026, or Arizona residents only may use the toll free number 800-345-5819.

TO SUBSCRIBE TO THE ANNUAL REPORT EMAIL REMINDER SERVICE, GO ONLINE TO http://ecorp.azcc.gov. USE THE SERVICE FEATURE AND SELECT "SUBSCRIBE TO EMAIL REMINDER TO FILE ANNUAL REPORT." YOU CAN ALSO SUBSCRIBE USING THE SEARCH FEATURE TO FIND YOUR CORPORATION'S RECORD, THEN CLICK ON THE BUTTON FOR "ANNUAL REPORT EMAIL REMINDERS." IF YOU CHOOSE NOT TO SUBSCRIBE, YOU WILL NOT RECEIVE ANY REMINDER AT ALL FROM THE COMMISSION.

Tell us how we are doing. Take the online customer service survey at www.azcc.gov/divisions/Corporations.