FLORIDA DEPARTMENT OF Environmental Protection

Ron DeSantis Governor

Jeanette Nuñez Lt. Governor

Shawn Hamilton Secretary

Bob Martinez Center 2600 Blair Stone Road Tallahassee, Florida 32399-2400

10/30/2024

hairo bermudez, owner GREEN FUTURE RECYCLERS LLC 4304 n lois ave Tampa,FL 33614

Dear hairo bermudez:

Your registration application for GREEN FUTURE RECYCLERS LLC, located at WEST SITKA ST AND BEJAMIN RD, Tampa in Hillsborough County has been received. The application indicated this facility is operating as a:

- Yard Trash Transfer Station
- X Yard Trash Recycling Facility
- _ Manure Blending Operation
- _ Vegetative, Animal Byproducts or Manure Composting Facility

And processing the following:

- X Yard Trash (including clean wood)
- _ Manure
- _ Animal byproducts (composting)
- _ Vegetative wastes (composting)
- _ Pre-consumer Vegetative (composting)

The registration application is complete, and is valid until August 1, 2025. The WACS identification number for this facility is 000107397.

You must comply with the requirements specified in Rule 62-709.320, and Rules 62-709.330 or 62-709.350, Florida Administrative Code (F.A.C.), in order to maintain qualification for the registration program. A summary of the operating requirements is enclosed.

If you need further information, please contact the Division of Waste Management, Waste Registration Section at the above address, Mail Station 4550, phone (850) 245-8707 or e-mail Waste.Registration@dep.state.fl.us.

Sincerely,

Lauren O'Connor Waste Registration Section

Enclosure

cc: Steven Tafuni; Southwest District

id ³ Departmen	Florida	Dep	partmer	nt of		09.901(3) or Reg. and Ann Rep n or SW Organic Rec	
	Environm	nenta	al Prote	ection	Effective Date		
			, Mail Station 4		DEP Facility ID No	(Filled in by DI	
milionmental protection	2600 Blair Stone Ro	oad, Talla	hassee, Florida	32399-2400	DEP WACS ID No	b:	
					709.901(3), F.A.C		
Application for Registration and	Annual Report for a Ya	ird Trash	n Transfer Sta	tion or a Solid	l Waste Orga	inics Recyclin	g Facility
	PART A - G	ENERAL	L INFORMATI	ON			
1. Type of Application: New	Renewal (due Jul	ly 1) 🔽	Annual	report only for t	facility operat	ing under pern	nit: 🗖
2. Type of Facility: Yard trash re Yard trash tr		√egetativ	e, animal bypr	N oducts or man	lanure blendii ure compostii		
3. Type of Waste Processed: Y	ard trash 🗹 Manure ′egetative (could/did come			products <u></u> al products or			
4. Facility Name: GREEN FUT	URE RECYCLERS LLC						
5. Registrant Name (or Permitte	e if annual report only):	GREEN F	UTURE RECYC	LERS LLC			
6. Federal Employer Identification	n Number:844428534						
7. Mailing Address: 4304 N Lois	Ave						
City	St	state Fl	L		Zip	33614 7027	
Street Mailing Address (if diffe	4304 n lois ave				·		
City Tampa	·	state FL	L		Zip	33614	
8. Facility Location - Street Addr			SITKA ST AND	BEJAMIN RD			
Tampa			Hillsborough				
		county	0	(813) 863-458	5		
9. Contact Person:			Telephone:	(013) 003-430	5		
				CIETRATION			
	DITIONAL INFORMATIO			GISTRATION		_	
10. Records required by Rule 62-	709.320, F.A.C., will be ke	ept at the	e facility?		Yes	L <u> </u>	
If no, please indicate where the	ese records will be kept a	and made	e available upc	n Department	request to re	view the record	IS:
11. Does the registrant own the fa					Yes	🗹 No	
-		•					
If you answered no, please a operate a yard trash transfe						the landowne	r to
12. Has the organic recycling faci	ity begun operations?				Yes	No No	
If this facility was operating	in the previous calenda	ar year, t	he annual rep	oort in Part C n	nust be com	pleted.	
13. Include a check or money ord Protection: Payment of \$35.00					epariment of	Environmenta	t
Laffirm that I have read F	Rules 62-709.320, 62-709.	.330 and	62-709.350. F	A.C. and sha	II comply with	the requireme	ents

I affirm that I have read Rules 62-709.320, 62-709.330 and 62-709.350, F.A.C., and shall comply with the requirements specified in those rules. I also affirm that the information provided in the application is true, accurate, and correct to the best of my knowledge. I have attached all documents and/or authorizations that are required.

hairo bermudez, owner		hairo bermudez	10/30/2024
Print Name and Title of Registrant or Authorized Agent		Signature	Date
Email address (if available):	hairobermudez@yahoo.com		

PART C - ANNUAL REPORT						
14.	Calendar Year (January 1 through December 31) Covered by this Report:	2023				
15.	Values used in this report are in (SELECT ONE):	Tons Cubic Yards				
16.	16. For Existing Facilities that have not reported this information in the past, Amount of					
	a. Unprocessed Material On Site at Beginning of Report Year:	3800				
	b. Processed Material On Site at Beginning of Report Year (total):	0				
17.	Total Quantity of Material Received During Report Year:	14625.00				
18.	Total Quantity of Material Lost Due to Processing (e.g. grinding, drying, shrinkage, fires, etc.) During Report Year:	1800.00				
19.	19. Total Quantity of Material Removed from Site for:					
	a. Use (e.g., landfill cover, fuel, mulch, compost, etc.):	0				
	b. Disposal:	12200.00				
	c. Other (transfer stations)	0				
20. Total Quantity On Site at End of Report Year of:						
	a. Unprocessed Material:	3950.00				
b. Processed Material:		475.00				
Note that the total sum of items 16 a and b plus 17 must equal to sum of items 18, plus 19 a, b and c, plus 20 a and b. Total of items 16 and 17 18425.00 Total of Items 18, 19 and 20 18425.00						
I affirm that the information provided in the annual report is true, accurate, and correct to the best of my knowledge.						
hairo bermudez, owner hairo bermudez.		10/30/2024				
Print Name and Title of Registrant/Permittee or Signa Authorized Agent		nature Date				
Email address (if available):hairobermudez@yahoo.com						

PART D - MAILING INSTRUCTIONS

This registration was completed and payment of \$35.00 (if applicable) was received via online transaction.

Remember to include the \$35.00 fee if this is also a registration application. Mail completed form to:

Department of Environmental Protection Solid Waste Section, MS 4565 2600 Blair Stone Road Taliahassee, Florida 32399-2400