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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Consideration to	Filtra Officers	
Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
AND AHASSEE, FLORIDA

COVER LETTER

Division	of Corporations		
SUBJECT:	Florida Su	estainables	LLC
	Name of L	imited Liability Com	pany
The enclosed Artic	cles of Organization and fee(s)	are submitted for fili	ing.
Please return all co	orrespondence concerning this	matter to the following	ng:
	Ryan Martin		
		Name of Person	
	Florida Susta	ainables	
		Firm/Company	
	283 (0114	Village	#4
		Address	
	Gainesville, FL rtmartin @ f	. 32603	-
	struction of f	City/State and Zip Co	de a a hlac
	E-mail address: (to be u	sed for future annual re	port notification)
For further informa	ation concerning this matter, pl		•
Kyan M	Name of Person	at (727	de & Daytime Telephone Number
r	Name of Person	Area Co	de & Daytime Telephone Number
Enclosed is a che	ck for the following amount	•	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Co	
	Mailing Address Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	Registra ns Division Clifton 2661 Ex	Courier Address Ition Section In of Corporations Building Recutive Center Circle Ssee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Florida Sustainable	es, LLC
(Must end with the words "Limited Liability	Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
283 Corry Village #4 Gainesville, FL 32603	283 Corry Village #44 Gainesville, FL 32603
Gainesville City, State	gistered agent are: Village # 4 ess (P.O. Box NOT acceptable) FL 32603 e, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete pery	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGR	Ryan Martin 283 Corry Village # 4 Gainesville, Ft: 32603		
(Use attachment if necessary)	Data of filing		
ARTICLE V: Effective date, if other than the dat (If an effective date is listed, the date must be sp	te of filing: <u>January 8, 2012</u> . (OPTIO	NAL) da ys p	rior
to or 90 days after the date of filing.)	CNE i	JAN	71
REQUIRED SIGNATURE:	ARY O	-9 -2	ILED
Signature of a member or	r an authorized representative of a member.	H 1: 52	<u>.</u>
constitutes an affirmation under the	8(3), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true on submitted in a document to the Department of State provided for in s.817.155, F.S.)		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Ryan Martin
Typed or printed name of signee