1/3000077547

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
MAY 2 9 2013				
A. LUNT				
w 13-15266				

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2013

PAULA A SANCHEZ 242 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442

SUBJECT: GREENSIDE, LLC Ref. Number: W13000015266

We have received your document for GREENSIDE, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is P93000013208.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 413A00006136

COVER LETTER

TO:	Registration Sec Division of Corp					
SUBJE	ст:	GREENSIDE Name of Limit	INTERIORS, LLC red Liability Company			
The enc	losed Articles of C	Organization and fee(s) are	submitted for filing.			
Please re	eturn all correspor	ndence concerning this matt	ter to the following:			
		PAULA A.	SANCHEZ Name of Person			
_	Ca			2013 H		
-			TEIZIORS, LLC Firm/Company	<u> </u>		
_	242	S MILITARY	/ TRAIL			
				黒油 り		
_		Cit	FL 33 4 4 2 ty/State and Zip Code			
E-mail address: (to be used for future annual report notification)						
For furth	er information co	ncerning this matter, please	e call:			
	AULA A	SANCHEZ Person	at (718) 460 305 Area Code & Daytime Telepl	hone Number		
Enclose	ed is a check for	the following amount:				
□\$125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci	rcle		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
GREENSIDE IN (Must end with the words "Limited Liabili	TEIZIORS, LLC	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Co	8
Principal Office Address:	Mailing Address:	표 동 'T
742 S MILITARY TRAIL DEERFIELD BEACH, FL 33442	32 JORALEMON STREETS STORE 1 BROOKLYN HEIGHTS, NY 11201	FILE D
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signatuered Agent. You must designate an individual or another.	rein
The name and the Florida street address of the re-	egistered agent are:	
PAULA A-SANCHET Name	Z	
242 S MILITARY	TIZA IL Iress (P.O. Box <u>NOT</u> acceptable)	
DEFREIELD BEACH,		
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacall statutes relating to the proper and complete and accept the obligations of my position as registered Agent's Signature (CONTINE)	his certificate, I hereby accept the appoin ity. I further agree to comply with the proe performance of my duties, and I am fam gistered agent as provided for in Chapter (REQUIRED)	ntment as ovisions of niliar with

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:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	PAULA A SANCHEZ 20-02 123rd S+ COLLEGE POINT NY 11356
NGRM	MERCEDES C. CARIOTI = = = = = = = = = = = = = = = = = = =
	COLLEGE POINT, NY 1/33 195 N
MGRM	GUANEIBY GIMENEZ TO THE STREET TO THE FLMHURST NY 11377
MGRM	CESAR ERNESTO METIA 37-06 98TH STREET CORONA NY. 11368
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: <u>MARCH 06, 2013</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

PAULA A. SANCHEZ
Typed or printed name of signee

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)

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	•
MORM	SERGIO BERMEJO 3768 97FH TREET APT#5B CORONA, NY 11368
MERM	NICOLAS SEGUNDO 91-16 B2ND STREET NOODHAVEN, NY 1421
MGRM	EDSON O. COLOMA 700 Columbus AVE APT 21J NEW YORK, NY 10025
MGRM	PABEL VAZQUEZ 236 26 TH STREET BROOKLYN, NY 11232

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