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PHILLIP J. O'BRIEN
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(248) 746-2703

April 13, 2000

Florida Department of State
Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, Florida 32314

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-04/17/00--01125--004
****285.00 ****160.00

Dear Sir/Madam:

Enclosed herein please a Certificate of Designation of Registered Agent together with an Affidavit of Membership and the filing fee of \$285.00. Would you please place same on record and return a true copy to me at the above-captioned address.

Should you have any questions, please feel free to contact the undersigned.

Very truly yours,

PHILLIP J. O'BRIEN

PJO/mt
Enclosures
c: Mr. Reginald Zielinski

00 JUN -7 AM 10:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

Name Availability	
Document Examiner	
Updater	DCC
Updater Verifier	DCC
Notarization	DCC
W. P. verifier	DCC

① affidavit

W000000010386
5 pages

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FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

April 19, 2000

PHILLIP J. O'BRIEN
SULLIVAN WARD BONE TYLER & ASHER, P.C.
P.O. BOX 222
SOUTHFIELD, MI 48037-0222

SUBJECT: GREEN ENTERPRISES, L.L.C.
Ref. Number: W00000010386

We have received your document for GREEN ENTERPRISES, L.L.C. and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective October 1, 1999, Chapter 608, Florida Statutes, does not require or permit the filing of an "Affidavit of Membership and Capital Contributions." Therefore, the enclosed document has not been filed and is being returned to you.

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) 487-6913.

Diane Cushing
Corporate Specialist

Letter Number: 200A00021567

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GREEN ENTERPRISES, L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

9140 SOUTH MONT COVE #310
FT. MYERS, FLORIDA 33908

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

☒ The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Reginald Zielinski
9140 South Mont Cove #310
Ft. Myers, Florida 33908

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: Members only not managers.

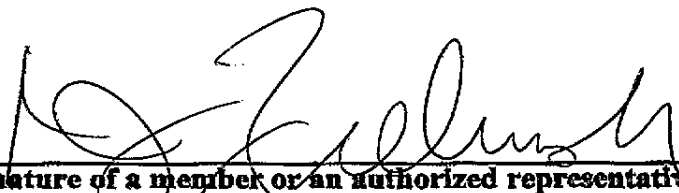
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TALLAHASSEE, FLORIDA

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

Perpetual

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

REGINALD ZIELINSKI

Typed or printed name of signee

Filing Fee: \$250.00 for Articles and Affidavit

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN
THE STATE OF FLORIDA.

1. The name of the limited liability company is: _____

GREEN ENTERPRISES, L.L.C.

2. The name and the Florida street address of the registered agent are:

REGINALD ZIELINSKI

NAME

9140 SOUTH MONT COVE #310

Florida street address (P. O. Box **NOT** ACCEPTABLE)

FT MYERS

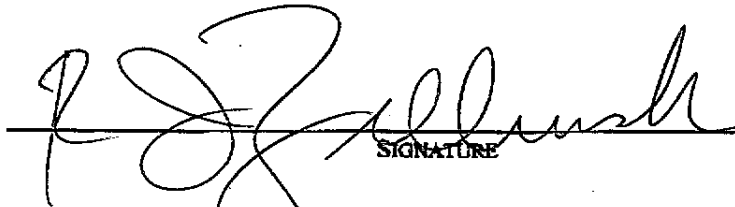
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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent