L06000027481

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
_
0
Special Instructions to Filing Officer
1/ 1 W 1
//
·

Office Use Only



400066871294

03/15/06--01012--001 **155.00

CORPDIRECT AGENTS, INC. (formerly CCRS) 515 EAST PARK AVENUE TALLAHASSÉE, FL 32301 222-1173

FILING COVER SHEET ACCT. #FCA-14

Examiner's Initials

CONTACT:	TRICĪA TA	DLOCK	
DATE:	03-14-06		TALLERAS SEE PH 2: LT
REF.#:	<u>0173.49365</u>		Sept of the sept o
CORP. NAME:	GREEN STI	REET INVESTMENTS, LLC	
() ARTICLES OF INCO	ORPORATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION
() ANNUAL REPORT		() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME
() FOREIGN QUALIFI	CATION	() LIMITED PARTNERSHIP	(XX) LIMITED LIABILITY
() REINSTATEMENT		() MERGER	() WITHDRAWAL
() CERTIFICATE OF C	CANCELLATION		
() OTHER:			
STATE FEES PI	REPAID WI	TH CHECK# <u>516374</u> FOR \$ <u>15</u>	5.00.
AUTHORIZATI	ON FOR AC	CCOUNT IF TO BE DEBITEI) :
<u> </u>	·	COST LIN	AIT: \$
PLEASE RETUI	RN:		
(XX) CERTIFIED C	ОРУ	() CERTIFICATE OF GOOD STAND	DING () PLAIN STAMPED COPY
` () CERTIFICATE OI			• •
(,			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	THE ST	
CONTRACTOR OF THE PARTY OF THE	79 (5) L 12	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
	(%) (%) (%) (%) (%) (%) (%) (%) (%) (%)	و لاع
	A CAN	1,145

ARTICLE I - Name:

The name of the Limited Liability Company is:

Green Street Investments, LLC	
ARTICLE II - Address:	
The mailing address and street address o	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
33 Honeysuckle Lane	633 Honeysuckle Lane
Weston, Florida 33327	Weston, Florida 33327

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Gil Karni	
	Name
633 Honeysuckie Lan	ie
Florida street ad	dress (P.O. Box <u>NOT</u> acceptable)
Weston	FLORIDA 33327
Cit	y, State, and Zip

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 as provided for in Chapter 608, Florida Statutes.

Gil Karni

By:

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

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 Qil Karni MORM 033 Honeysuckie Lane Waston, Florida 33327 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. 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.) Gii Kami Typed or printed name of signee \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent

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