

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : BARINAS & ASSOCIATES INC.
Account Number : I20000000082
Phone : (305) 871-0889
Fax Number : (305) 870-9623

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

At Thomas JUL 27 2006

FLORIDA/FOREIGN LIMITED LIABILITY CO.

GREEN 12, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GREEN 12, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

BARON BARINAS
(Name of Person)

(Firm/Company)

5701 NW 36 STREET
(Address)

MIAMI, FL 33166
(City/State and Zip Code)

For further information concerning this matter, please call:

BARON BARINAS at (305) 871-0889
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 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 Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

GREEN 12, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "L.L.C." or "L.C..")

ARTICLE II - Address:

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

Principal Office Address:11246 NW 59 TERRACEDORAL, FL 33178**Mailing Address:**11246 NW 59 TERRACEDORAL, FL 3317806 JUL 26 AM 8:34
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JEANNETTE QUINTERO

Name

11246 NW 59 TERRACEFlorida street address (P.O. Box **NOT** acceptable)DORAL FL 33178

City, 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, 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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRJEANNETTE QUINTERO11246 NW 59 TERRACEDORAL, FL 33178MGRRICARDO ROSALES11246 NW 59 TERRACEDORAL, FL 33178MGRFERNANDO H. MONSALVOCALLE ARTURO MICHELENA, EDIFICIO SOHO, P.H.
LOS NARANJOS DE LAS MERCEDES, CARACAS, VENEZUELAMGRMARIA A. VACA DE MONSALVOCALLE ARTURO MICHELENA, EDIFICIO SOHO, P.H.
LOS NARANJOS DE LAS MERCEDES, CARACAS, VENEZUELA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

JEANNETTE QUINTERO

Typed or printed name of signer

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)

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TALLAHASSEE, FLORIDA

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