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(Re	equestor's Name)	
(Ad	ldress)	
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(Ad	ldress)	•
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
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(Do	cument Number)	
Certified Copies	Certificates	s of Status
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Special Instructions to	Filing Officer:	





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2008 JAN 18 PH 1: 14
SECRETARY OF STATE
TALLAHASSEE, FLORIOA

T. CLINE

JAN 2 2 2008

EXAMINER

COVER LETTER

	Registration Division of C					
SUBJEC	CT: GREE	ENPOINT CAPITAL	L MANAGE	MENT, LL	.C	
		(Name of Limit	ed Liability Compa	any)		
The encl	osed Articles	of Organization and fee(s) are	submitted for filing	g.		
Please re	turn all corres	pondence concerning this mat	ter to the following	;;		
J	ULIE HA	NCOCK				
			(Name of Person)			
L	AW OF	FICES OF MICHAE	EL LAPAT			
_			(Firm/Company)			
3	300 UNI	IVERSITY DRIVE	SUITE 311			
			(Address)			
_	CORAL S	SPRINGS FL 3306	65			
		(Cit	y/State and Zip Code	e)		
For furth	er informatior	n concerning this matter, please	e call:			
JULIE	HANC	OCK	at (954	345-644	2	
	(Nam	ne of Person)	(Area Cod	e & Daytime Tel	ephone Number) S	
Enclose	d is a check t	for the following amount:			AND THE SECOND S	i i
□ \$125.0¢	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Co (additional cop.	py y is enclosed)	\$160.00 Filling Fee, Certificate of Status & Certified Copy (additional copy is enclosed	and the state of t
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Exc	ourier Address ion Section of Corporations suilding ecutive Center Cosee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GREENPOINT CAPITAL MANAGEMENT, 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 principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
601 S FEDERAL HWY SUITE 150	601 S FEDERAL HWY SUITE 150
BOCA RATON, FL 33432	BOCA RATON, FL 33432

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:

DOUGLAS GREEN

Name

601 S FEDERAL HWY SUITE 150

Florida street address (P.O. Box NOT acceptable)

BOCA RATON, FL 33432

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)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:	
"MGR" = Manag "MGRM" = Man		
MGR	DOUGLAS GREEN	
	601 S FEDERAL HWY SUITE 150	
	BOCA RATON, FL 33432	
	BOCA NATON, FE 33432	
<u> </u>		
		
		
		
		
(Use attachment	if necessary)	
	•	
	date, if other than the date of filing: (
	ted, the date must be specific and cannot be more than five bu	siness days pri
0 days after the da	te of filing.)	
REQUIRED SIG	CNATURE	
REQUIRED		
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	Nala C. Ch	Ala 63
	Signature of a member or an authorized representative of a member.	2000 SEC ALL,
	(In accordance with section 608.408(3), Florida Statutes, the execution	ORETA CRETA
	of this document constitutes an affirmation under the penalties of perjury	AS I
	that the facts stated herein are true.)	138. 18 18
	DOUGLAS GREEN, MANAGER	
	Typed or printed name of signee	25 T
Filing Face		
Filing Fees:		Ç

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)