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SECRETARY OF STATE STATE OF CORPORATIONS

08 FEB 12 PM 2: 06

J. BRYAN

FEB 1 3 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: The G	reen Garment, LLC		
	(Name of Limite	d Liability Company)	
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	pondence concerning this matte	er to the following:	
Jeremy T.I	M. Novak		
	(Name of Person)	
Novak Law	Offices PLLC		
	(Firm/Company)	
209 7th S	treet		08 FEB 12 PM 2: 06
		(Address)	-
Port St. Jo	oe, Florida 32456		2 P
	(City	/State and Zip Code)	~ ~
For further information	concerning this matter, please	call:	.06
Jeremy T.M. Nov	vak	at (850) 250-1117	
(Name	e of Person)	(Area Code & Daytime Telephone N	lumber)
Enclosed is a check for	or the following amount:		
▼ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certification (additional copy is enclosed) Certification Certific	50.00 Filing Fee, cate of Status & Ted Copy nal 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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	mpany is:		
The Green Garment, LLC			
(Must end with the words "Limited Liability Comp	pany, "Limited Company" or their abbreviation "LLC," or	"L.C.,")	
ARTICLE II - Address: The mailing address and street address	s of the principal office of the Limited Liabil	lity Company i	is:
Principal Office Address:	Mailing Address:		
209 7th Street			
Port St. Joe, Florida 32456			
			
(The Limited Liability Company cannot serve as it business entity with an active Florida registration		l or another	
The name and the Florida street addre	•	98 FI)) () ()
Jeremy T.M. Novak	Name	191510N OF 6	经
Novak Law Office	s, PLLC	2 PH	
Floric	da street address (P.O. Box NOT acceptable)	ن ا	RSTA STA
209 7th Street	FL 32456 City, State, and Zip	2: 06	TONS TE NS
liability company at the place desig registered agent and agree to act in th	ent and to accept service of process for the abor gnated in this certificate, I hereby accept the a his capacity. I further agree to comply with the	appointment as e provisions of	all
	omplete performance of my duties, and I am fa on as registered agent as provided for in Chap		d
		•	
Registeret Ag	ent's Signature (REOLURED)		

(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:

"MGR" = Manag "MGRM" = Man		Name and Address:	
MGRM		Jeremy T.M. Novak	
		209 7th Street	
		Port St. Joe, Florida 32456	
MGRM		Patrick Farrell	
		236 Balboa Drive	
		Port St. Joe, Florida 32456	
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CLE V: Effective	date, if other than the dated, the date must be sate of filing.))PTIONA
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CLE V: Effective effective date is lis days after the de	date, if other than the dated, the date must be sate of filing.) GNATURE: Signature of a member of the control of the contro	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury)PTIONA
CLE V: Effective effective date is lis days after the days	date, if other than the dated, the date must be sate of filing.) GNATURE: Signature of a member of this document constitution of this document constitution.	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury)PTIONA

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)