LU8000033335

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



400121187474

04/02/08--01002--022 **78.75

04/02/08--01002--023 **76.25



B. KOHR
APR - 2 2008

EXAMINER



LAZARUS CORPORATE FILING SERVICE 3320 SW 87TH AVENUE MIAMI, FL 33165 305-552-5973

CR2E031(7/97)

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) Certified Copy Pick up time Mail out ■ Will wait Photocopy Certificate of Status **NEW FILINGS AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY TO		
ECO-GREEN REC (Must end with the words "Limited Liability	YCLING LLC." or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
4/// N.W. 135 ST mi smi FC 33054 ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:		
(The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)			
The name and the Florida street address of the re	egistered agent are:		
FERNANDO 1	MONTEIRO		
Name			
4/// N. W. /	ress (P.O. Box NOT acceptable)		
miami City, State, at	FL 33054 nd Zip		
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all afternance of my duties, and I am familiar with and tered 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: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	FERNANDO MONTEIRO 4/11 N.W. 135 SS. MIDMI FL 33054
MGRM	ADOLFO ESPINOSO 4111 N.W. 135 SC mismi FL 33054
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
(In accordance with s of this document consthat the facts stated	ection 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)

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)