L08000440000

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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W08000021736



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04/29/08--01022--009 ++155.00

08 APR 29 AM 7: 58
SECRETARY OF STATE
TALLAHASSEE, FLORIO

Office Use Only

EFFECTIVE DATE 4-87-08

D. BRUCE

MAY 1 2 2008

EXAMINER

COVER LETTER

Division of Co			
_{SUBJECT:} Go Gr	een Pedicabs, LLC		
	(Name of Limited	Liability Company)	
The enclosed Articles of	f Organization and fee(s) are su	bmitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
Carlos A.	Lastres Jr.		
	(N	lame of Person)	
Go Green	Pedicabs, LLC		
	(1	Firm/Company)	
7411 SW	54th Avenue		08 AF
		(Address)	
Miami, FL	33143		Sign of the
	(City/	State and Zip Code)	
For further information	concerning this matter, please of	all:	7: 58 SIATE ELORIDA
Carlos A. Lasti	res Jr.	786 942-201	
(Name	e of Person)	(Area Code & Daytime Tel	lephone Number)
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 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 Corporation Clifton Building 2661 Executive Center (s

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 30, 2008

CARLOS A. LASTRES JR. 7411 SW 54TH AVENUE MIAMI, FL 33143

SUBJECT: GO GREEN PEDICABS, LLC

Ref. Number: W08000021736

08 APR 29 AN 7:58
SECRETARY OF STATE

We have received your document for GO GREEN PEDICABS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain both the street address of the principal office and the mailing address of the entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 108A00026978

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Go Green Pedicabs, LLC	
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7411 SW 54th Avenue Mi Ami, FL 33143	7411 SW 54th Avenue MiAmi, FC 33143
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the recent Carlos A. Lastres Jr. Name	red Agent. You must designate an individual or shother O
7411 SW 54th Avenu	وي ري الم
Florida street addr	ess (P.O. Box NOT acceptable)
Miami, FL 33143	FL
City, State, ar	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the propey and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

EFFECTIVE DATE 4-27-08

ARTICLE I - Name:

(CONTINUED)
Page 1 of 2

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:

"MGR" = Manag "MGRM" = Mar		Name and Address:	
MGRM	-	Carlos A. Lastres Jr.	
		7411 SW 54th Avenue	_
		Miami, FL 33143	_
MGRM		Jessie M. Lastres	
		7411 SW 54th Avenue	
		Miami, FL 33143	_
		····	
			_
			_
	date, if other than the ted, the date must be	date of filing: 04/27/2008 . (OPTI	
CLE V: Effective effective date is lis	date, if other than the ted, the date must be te of filing.)		s days
CLE V: Effective of the control of t	date, if other than the ted, the date must be te of filing.)		s days
CLE V: Effective of effective date is lised to days after the days	date, if other than the sted, the date must be ate of filing.)		08 APR 29
CLE V: Effective of the control of t	date, if other than the sted, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with sec	e specific and cannot be more than five busines A S S S S S S S S S S S S S S S S S S	s days 08 APR 29 AM
CLE V: Effective of the control of t	date, if other than the sted, the date must be ate of filing.) GNATURE: Signature of a member (In accordance with sec	r r an authorized representative of a member.	08 APR 29

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)