108000052017

ŧ		
(Re	questor's Name)	·
(Ad	dress)	.
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PłCK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	,	
•		

Office Use Only



200129915822

05/23/08--01004--006 **160.00

2000 HAY 23 PM 1: 01

T. CLINE

MAY 2 7 2008

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations				
. SUBJE	CCT: SUSTAINABLE BIO LLC (Name of Limited Liability Company)				
	closed Articles of Organization and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following: CHRISTOPHER WORTHINGTON (Name of Person)					
	(Firm/Company)				
-	9907 TREE TOPS LAKE ROAD				
	(Address)				
-	TAMPA FLORIDA 33626 (City/State and Zip Code)				
For further information concerning this matter, please call:					
C+	(Name of Person) at (727) 776 91599 (Area Code & Daytime Telephone Number)	, ()			
(Name of Person) (Area Code & Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$125. 6	00 Filing Fee \$\bigsquare\$\$\\$130.00 Filing Fee & \$\bigsquare\$				
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liabili	ty Company is:			
SUSTAINAE	BLE BIO	o LLC		
(Must end with the w	ords "Limited Liabilit	y Company, "L.L.C.," or "LLC	.")	
ARTICLE II - Address: The mailing address and street a	ddress of the pri	ncipal office of the Lim	ited Liability Compan	ıy is:
Principal Office Address:		Mailing Address:		
9907 TREE TOPS TAMPA FL 33620	-	TAME	TOPS LAKERD	
ARTICLE III - Registered Ag (The Limited Liability Company cannot se business entity with an active Florida regi	rve as its own Registe	Office, & Registered A red Agent. You must designate	an individual orien other	
The name and the Florida street	address of the re	gistered agent are:	PM 1:01 OF STATE E,FLORID	the same
CHRIS	TOPHER WO	KTHINGTON	PAT O	
	Name		9m =	
9907		LAKE RD ess (P.O. Box NOT acceptate	ble)	
TAI	MFA City, State, an	FL 33626 d Zip		
Having been named as registered liability company at the place registered agent and agree to accept the obligations of my	ed agent and to a e designated in th et in this capacity. and complete per	ccept service of process f is certificate, I hereby ac I further agree to comp formance of my duties, a	scept the appointment of the with the provisions of the I am familiar with a	as of all and

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	CHRISTOPHER WORTHINGTON 9907 TREE TOPS LAKERD TAMPA FL 33626
MGRM	PHILIP MOORE 9907 TREE TOPS LAKE RD TAMPA 33626
(Use attachment if necessary)	2008 MAY 23 SECRE JARY TALLAHASSE
ARTICLE V: Effective date, if other than the date	e of filing: (OPTIONAL) ecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	Working C
(In accordance with section of this document constitutes that the facts stated herein	an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.) 60H-L WORTHINGTON 60 printed name of signee

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)