# LODOWOO91

| (Requestor's Name)                      |
|---|
| (Address)                               |
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| (Address)                               |
| (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: |
| L. SELLERS                              |
| ·                                       |
| JUN 2 5 2008                            |
| EXAMINER                                |

Office Use Only



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ZECEFTARY OF STATE

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |
|---|
| SUBJECT: GREEN SOLUTION GROUP LLC.  |
| (Name of Limited Liability Company)   |
|   |
| The enclosed Articles of Organization and fee(s) are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
| MARIA LILIANA ROBLES  |
| (Name of Person)  |
|   |
| (Firm/Company)  |
| 15242 SW 147 COURT  |
| (Address)   |
| MIAMI FL 33187  |
| (City/State and Zip Code)   |
| For further information concerning this metter places call.   |
| For further information concerning this matter, please call:  |
| MARIA LILIANA ROBLES <sub>at (</sub> 305 <sub>)</sub> 971-9399  |
| (Name of Person) (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for the following amount:   |
| \$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Status}\$\$  Certificate of Status \$\text{Certified Copy (additional copy is enclosed)}\$\$  Certified Copy (additional copy is enclosed) |
| Mailing Address  Registration Section  Division of Corporations  Street/Courier Address  Registration Section  Division of Corporations   |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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 Company is:  |  |  |        |  |
|--|--|--|--------|--|
| GREEN SOLUTION GROUP   |  |  |        |  |
| (Must end with the words "Limited Liabi  | lity Company, "L.L.C.," or "LLC.")   |  |        |  |
| ARTICLE II - Address: The mailing address and street address of the p  | rincipal office of the Limited Lia   | bility Company is:   |        |  |
| Principal Office Address:  | Mailing Address:   |  |        |  |
| 15242 SW 147 COURT   | 15242 SW 147 COURT   |  |        |  |
| MIAMI FL 33187   | MIAMI FL 33187   |  |        |  |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the interest of the server and int | stered Agent. You must designate an individ  |  |        |  |
| MARIA LILIANA I  |  |  |        |  |
| 15242 SW 147 C   |  |  |        |  |
| Florida street address (P.O. Box NOT acceptable)   |  |  |        |  |
| MIAMI FL 33187 FL  |  |  |        |  |
| City, State,   | and Zip  |  |        |  |
| Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete per accept the obligations of my position as regi   | this certificate, I hereby accept the y. I further agree to comply with i exformance of my duties, and I am stered agent as provided for in Ch | appointment as<br>the provisions of all<br>familiar with and |        |  |
| Registered Agent's Signa   | ture REQUIRED)   | ZOOR JUN 23 PH SECRETARY OF TALLAHASSEE.FE                   | :<br>: |  |
| (CONTIN<br>Page 1 of   |  | 2: 33<br>STATE<br>LORIDA                                     |        |  |

#### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| <u>Title:</u> "MGR" = Manager | Name and Address:           |
|-------------------------------|-----------------------------|
| "MGRM" = Managing Member      |                             |
| MGRM                          | OSWALDO EDIMSON OVALLE      |
|                               | 15242 SW 147 COURT          |
|                               | MIAMI, FL 33187             |
| MGRM                          | CARLOS ALBERTO ROJAS LOAIZA |
|                               | 14323 SW 96 LAN             |
|                               | MIAMI, FL 33186             |
| SECRETARY                     | MARIA LILIANA ROBLES        |
|                               | 15242 SW 147 COURT          |
|                               | MIAMI, FL 33187             |
|                               |                             |
|                               |                             |
|                               |                             |
|                               |                             |
|                               |                             |

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 07/01/2008 . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

#### **REQUIRED SIGNATURE:**

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

### OSWALDO EDIMSON OVALLE

Typed or 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)

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