L0900000494

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(Address)	
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PICK-UP WAIT MAIL	
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T. HAMPTON

JAN - 5 2009

EXAMINER

COVER LETTER

TO: Registration Section \ Division of Corporations
SUBJECT: Green moves - Food 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:
McJodye Reger (Name of Person)
(Name of Person)
The Wharf Bart Grill
(Pirm Company)
100 Bay Dr
(Address)
Key West, P. 33040 (City State and Zip Code)
(City State and Zip Code)
For further information concerning this matter, please call:
Melodye Reger at (365) 745-2940 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times\$ \$130.00 Filing Fee \$\times\$ \$\times\$ \$\$155.00 Filing Fee \$\times\$ \$\$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$ \$\$\$\$ Certificate of Status \$\$\$\$\$ Certified Copy (additional copy is enclosed) \$\$\$\$\$ \$\$\$\$\$ (additional copy is enclosed)
Mailing Address Street/Courier Address

Registration Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A POST COLOR DE LA CALLANDA DE LA CA	
ARTICLE I - Name: The name of the Limited Liability Company is:	
Greenmoues-Food LLC	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limited I	Liability Company is:
Principal Office Address: Mailing Address:	
100 Bay Dr Mclodyc Kre	ger _
Key West, F1 55040 Key West, F1	23040
ARTICLE III - Registered Agent, Registered Office, & Registered Agent (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an indibusiness entity with an active Florida registration.)	's Signature; ividual or another
The name and the Florida street address of the registered agent are:	
Wellsdue-Reace	
Name	
100 Bay Dr	
Florida street address (P.O. Box NOT acceptable)	
Key West FL 33040	
) City, State, and Elp	
Having been named as registered agent and to accept service of process for the liability company at the place designated in this certificate, I hereby accept	
registered agent and agree to act in this capacity. I further agree to comply wi	
statutes relating to the proper and complete performance of my duties, and I accept the obligations of my position as registered agent as provided for in	
decept the obligations of my position as registered agent as provided for in	Chapter 606, P.S
, 20.0.1	
Registered Agent's Signature (REQUIRED)	08
J	DIVISION OR DEC
	(C 포유 (C 포유
	- 67
(CONTINUED)	AHI RPC

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 "MGRM" = Managing Member	Name and Address:
mgR	Melodye Reger 100 Baty Dr Key West Fl 33040
mgRm	Donna Knull 1315 Johnson St Knywkst, Fl 33040
(Use attachment if necessary) RTICLE V: Effective date, if other than the an effective date is listed, the date must be or 90 days after the date of filing.)	e date of filing: (OPTIONAL) De specific and cannot be more than five business days pri
REQUIRED SIGNATURE:	
Signature of a memb	er or an authorized representative of a member.
(In accordance with se	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury
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)