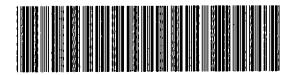
# L09000011996

(Re	equestor's Name)	•
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bı	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	•	

Office Use Only



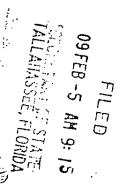
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OPEB-5 PM 4: 49
DIVISION OF CELL PLANTON
DIVISION OF CELL PLANTON

B. KOHR

**EXAMINER** 



CORPDIRECT AGE 515 EAST PARK AV TALLAHASSEE, FL 222-1173	ENUE	rmerly CCRS)	
FILING COVER S ACCT. #FCA-14	SHEET		
CONTACT:	ASHLEY S	<u>MITH</u>	
DATE:	<u>02-05-2009</u>		17 09 FF
REF. #:	000687.9962	<u>21</u>	FILEC
CORP. NAME:	FABCO CO	ORP.	OPER-5 AM 9: 15
( ) ARTICLES OF INCO	RPORATION	( ) ARTICLES OF AMENDMENT	( ) ARTICLES OF DISSOLUTION
( ) ANNUAL REPORT		( ) TRADEMARK/SERVICE MARK	( ) FICTITIOUS NAME
( ) FOREIGN QUALIFIC	CATION	( ) LIMITED PARTNERSHIP	( ) LIMITED LIABILITY
( ) REINSTATEMENT		( ) MERGER	( ) WITHDRAWAL
( ) CERTIFICATE OF C (XX) OTHER: CERTIFI			
STATE FEES PR	REPAID W	ITH CHECK# 529185	FOR \$ <u>180.00</u>
AUTHORIZATIO	ON FOR A	CCOUNT IF TO BE DEBITE	D:
		COST LI	MIT: \$
PLEASE RETUR	RN:		
(XX) CERTIFIED COP		( ) CERTIFICATE OF GOOD STAN	DING ( ) PLAIN STAMPED COPY

Examiner's Initials

## Certificate of Conversion For

# "Other Business Entity"

Into

# Florida Limited Liability Company

This Certificate of Conversion and attached Articles of Organization are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Bu Certificate of Conversion is:	ismess entity immediate	ely prior to the ming of this			
	FABCO CORP.	·			
(En	ter Name of Other Busin	ness Entity) FU6000116748			
<ol><li>The "Other Business Entity</li></ol>		· · · · · · · · · · · · · · · · · · ·			
(Enter entity type. Example: corporation, limited partnership, sole proprietorship, general partnership, common law or business trust, etc.)					
first organized, formed or inco	orporated under the laws	of Florida			
- · · · · · · · · · · · · · · · · · · ·	if a non-U.S. entity, the				
on 09/11/2006; effective 09/10/2 (Enter date "Other Busin		ganized, formed or incorporated)			
3. If the jurisdiction of the "Cunder the laws of which it is r	•	as changed, the state or country r incorporated:			
4. The name of the Florida Li Articles of Organization:	imited Liability Company	y as set forth in the <b>attached</b>			
GREENTECH GROUP SOLUTI	ONS, LLC				
(Enter Nar	ne of Florida Limited L	iability Company)			
5. If not effective on the date	of filing, enter the effect	ive date:			
	•	than 90 days after the date this			
		te; AND 2) must be the same as the			
	tached Articles of Orga	nization, if an effective date is			
listed therein.)					

Signed this 31 day of January	_ 20_09
Signature of Member or Authorized Representa	tive of Limited Liability Company:
	THE AS
Signature of Member or Authorized Representative	
Printed Name: Jorge Fonte	
Signature(s) on behalf of Other Business Entity:   Signature:	
Signature:	Title: President
Printed Name: Jorge Fonte	_ Title: President
Signature: Printed Name:	
Signature:Printed Name:	Title:
Signature:	
Printed Name:	Title
Timed Name.	_ 11de
Signature: Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation: Signature of Chairman, Vice Chairman, Director, or Officers have not been selected, an Inc.	
If Florida General Partnership or Limited Liabilit Signature of one General Partner.	y Partnership:
If Florida Limited Partnership or Limited Liabilit Signatures of <u>ALL</u> General Partners.	
All others: Signature of an authorized person.	
Fees:	
Certificate of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R	TI	CL	Æ	Ι.	. N	an	10:

The name of the Limited Liability Company is:

#### GREENTECH GROUP SOLUTIONS, LLC

(Must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC.")

#### **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

#### **Principal Office Address:**

#### Mailing Address:

20283 State Road 7		20283 State Road 7	
Suite # 300		Suite # 300	+
Boca Raton, FL 33498	+	Boca Raton, FL 33498	

# ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another

business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Jorge Fonte	
	Name
20283 State Road 7,	, Suite # 300
Florida street addres	s (P.O. Box <u>NOT</u> acceptable)
Boca Raton	FL 33498
Cit	y, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608. F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

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

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

"MGRM" = Managing Member	
MGRM	Jorge Fonte 20283 State Road 7, Suite # 300
	Boca Raton, FL 33498
	(Use attachment if necessary)
	ve date of filing:
nt is filed by the Florida Departm ctive date listed in the attached	(OPTIONAL) nor more than 90 days after the date this lent of State; <u>AND</u> 2) must be the same as Certificate of Conversion, if an effective
Tective date: 1) cannot be prior to nt is filed by the Florida Departm	(OPTIONAL) nor more than 90 days after the date this ent of State; <u>AND</u> 2) must be the same as
ective date: 1) cannot be prior to nt is filed by the Florida Departmetive date listed in the attached isted therein.)  REQUIRED SIGNATURE:	(OPTIONAL) nor more than 90 days after the date this ent of State; <u>AND</u> 2) must be the same as
rective date: 1) cannot be prior to nt is filed by the Florida Departmentive date listed in the attached isted therein.)  REOUIRED SIGNATURE:  Signature of a member or an auxiliary of this document constitutes an auxiliary of the section 608 of this document constitutes an auxiliary of the section 608 of the section	(OPTIONAL) nor more than 90 days after the date this tent of State; <u>AND</u> 2) must be the same as Certificate of Conversion, if an effective

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)