## LOMOMO

| (Requestor's Name)                      |
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| (Address)                               |
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| (Address)                               |
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| (City/State/Zip/Phone #)                |
|   |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
| _                                       |
| Certified Copies Certificates of Status |
|   |

Special Instructions to Filing Officer:

L. SELLERS

MAR - 5 2009

**EXAMINER** 

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## COVER LETTER

| TO: Registration S Division of Co |   |   |  |
|-----------------------------------|---|---|--|
| SUBJECT:                          | -o Green Dig<br>(Name of Limi   | ital, LLC   |  |
|                                   | (Name of Limi   | ited Liability Company)   |  |
| The enclosed Articles of          | f Organization and fee(s) are   | submitted for filing.   |  |
| Please return all correspondent   | ondence concerning this ma  | tter to the following:  |  |
|                                   | Joshua  | Massie (Name of Person)   | · •  |
|                                   |   | (Name of Person)  |  |
|                                   | Go Gr   | een Dis: tal, LLC   |  |
|                                   |   | (Firm/Company)  |  |
|                                   | 160 Gallowa   | y Drive   |  |
|                                   |   | (Address)   |  |
| h                                 | linter Springs  | ,FL 32708   |  |
|                                   | (Ci   | ty/State and Zip Code)  |  |
| For further information of        | concerning this matter, pleas   | se call:  |  |
| Joshua                            | Massie  | at (407) 284~<br>(Area Code & Daytime Tele  | 7394   |
| (Name                             | of Person)  | (Area Code & Daytime Tele   | phone Number)  |
| Enclosed is a check fo            | r 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,<br>Certificate of Status &<br>Certified Copy<br>(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 Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301 | ,  |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is:   |   |
|---|---|
| Go Green Digital, LLC (Must end with the words "Limited Liability Co  | ompany, "L.L.C.," or "LLC.")  |
| ARTICLE II - Address: The mailing address and street address of the princi  | pal office of the Limited Liability Company is:   |
| Principal Office Address:   | Tailing Address:  |
| 760 Galloway Drive<br>Winter Springs, FL 32708  | 760 Galloway Drive<br>Winter Springs, FL 32708  |
| ARTICLE III - Registered Agent, Registered Of (The Limited Liability Company cannot serve as its own Registered business entity with an active Florida registration.)   | fice, & Registered Agent's Signature: Agent. You must designate an individual or another  |
| The name and the Florida street address of the regis  | stered agent are:   |
| Joshua Massie<br>Name   |   |
| Name  |   |
| 760 Gallowa. Florida street address   |   |
| Winter Springs FL<br>City, State, and Z   | <u>, 32708</u><br>lip   |
| Having been named as registered agent and to acceliability company at the place designated in this cregistered agent and agree to act in this capacity. It statutes relating to the proper and complete performancept the obligations of my position as registere | certificate, I hereby accept the appointment as<br>further agree to comply with the provisions of all<br>mance of my duties, and I am familiar with and |
| Registered Agent's Signature (  | O9 HAR -5 A   |

(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:

| <u>tle:</u><br>1GR" = Manager  | Name and Address:  |
|--|--|
| IGRM" = Managing Member  |  |
| MGRM   | Joshua Massie  |
|  | Joshua Massie<br>760 Galloway Drive<br>Winter Springs, FL 32708  |
| MGR  | ,  |
| /•1 G-K  | Larry Davis<br>28 Shadow Creek Way   |
|  | Ormand Beach, FL 32174   |
| MGR  | Linda M. Davs  |
|  | 28 Shadow (reek Way<br>Ormand Beach, FL 32174  |
|  | ormand beach, 1 - 3211   |
|  | - <del></del> -  |
|  |  |
| se attachment if necessary)  |  |
| V: Effective date, if other than   | the date of filing: (OPTIONAL)   |
| V: Effective date, if other than   | the date of filing: (OPTIONA<br>st be specific and cannot be more than five business day   |
| EV: Effective date, if other than effive date is listed, the date must sys after the date of filing.)  EQUIRED SIGNATURE:  | st be specific and cannot be more than five business day   |
| EV: Effective date, if other than effive date is listed, the date must says after the date of filing.)  EQUIRED SIGNATURE:  Signature of a mer   | st be specific and cannot be more than five business day  La Mosmo  mber or an authorized representative of a member.  |
| EV: Effective date, if other than exive date is listed, the date must eys after the date of filing.)  EQUIRED SIGNATURE:  Signature of a men of this document control of this document control.        | st be specific and cannot be more than five business day   |
| EV: Effective date, if other than exive date is listed, the date must eys after the date of filing.)  EQUIRED SIGNATURE:  Signature of a menute of this document control that the facts state.         | mber or an authorized representative of a member.  th section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ted herein are true.)   |
| EV: Effective date, if other than exive date is listed, the date must eys after the date of filing.)  EQUIRED SIGNATURE:  Signature of a menute of this document control that the facts state.         | mber or an authorized representative of a member.  th section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ted herein are true.)   |
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| EV: Effective date, if other than exive date is listed, the date must eys after the date of filing.)  EQUIRED SIGNATURE:  Signature of a men of this document of this document of that the facts state | mber or an authorized representative of a member.  h section 608.408(3), Florida Statutes, the execution onstitutes an affirmation under the penalties of perjury ted herein are true.)  Massie  Typed or printed name of signee |