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SECRETARY OF STATE.
TALLAHASSEE

S. HAWKES

MAR 1 9 2009

EXAMINER

COVER LETTER

TO:	Registration Division of C			
SUBJI	ЕСТ:	Green Back (Name of Limited	Environmental Liability Company)	,uc
The en	closed Articles	of Organization and fee(s) are su	bmitted for filing.	
Please	return all corres	spondence concerning this matter	to the following:	
		Richard V	<u>2senstun, Esq.</u> ame of Person)	
	The	Law office of	Richard Rosenll	um, PA
		517 SW	1st Avene	
		Fort Law derdad	Le: Florida 3.	3301
For fur	ther information	n concerning this matter, please co	ali:	
	David (Nam	N. K: Sby a	(Area Code & Daytime Tele	Phone Number)
Enclos	sed is a check t	for the following amount:		_
] \$125.	00 Filing Fee	\$130.00 Filing Fce & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (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 FI	ORIDA LIMITED LIABILITY COMPANY			
ARTICLE I - Name: The name of the Limited Liability Company is:	THE STATE OF THE PARTY OF THE P			
(Must end with the words "Limited Liabi	Sivamental, LLC lity Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the particle.	rincipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
3730 Roverrary Drive Suite 26 Landerhill, FL 33319	3730 Inversary Drive Site 26 Lauderhill, FL 33319			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)				
The name and the Florida street address of the registered agent are:				
R. Jack Ros Name	erblm, Esq.			
Florida street address (P.O. Box <u>NOT</u> acceptable)				
For + Landerdale City, State,	, FL 3.33%) and Zip			
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete po	accept service of process for the above stated limited this certificate, I hereby accept the appointment as by. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S			
Registered Agent's Signa	ture (REOUIRED)			
regissored regula bigin	······································			

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (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.) Typed or printed name of gnee

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)