

LO9000038362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

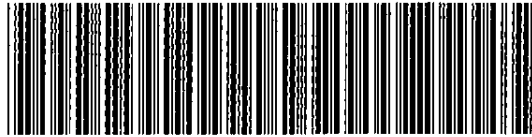
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200149850792

04/20/09--01039--024 **160.00

EFFECTIVE DATE
4/18/09

FILED
09 APR 20 AM 8:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. O. ~~Office~~ APR 22 2009

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Greener Days Maintenance 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:

Jonathan Gregory
(Name of Person)
Greener Days Maintenance LLC
(Firm/Company)
2934 Echosassa Trail
(Address)
Oviedo, FL 32765
(City/State and Zip Code)

For further information concerning this matter, please call:

Sulaiman Samandar at 407, 621-1537
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Greener Days Maintenance 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 Liability Company is:

Principal Office Address:

2934 Echosassa Trail
Oviedo, FL 32765

Mailing Address:

2200 Winter Springs Blvd.,
Suite 106-3531
Oviedo, FL 32765

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:

Vivien Samandar
Name
1477 Casa Park Circle
Florida street address (P.O. Box **NOT** acceptable)
Winter Springs, FL 32708
City, State, and Zip

FILED
09 APR 20 AM 8:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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..

Vivien Samandar
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

MGRM

MGRM

Name and Address:

Jonathan Gregory
2934 Echosassa Trail
Orlando, FL 32765

Sulaiman Samandar
1477 Casa Park Circle
Winter Springs, FL 32708

Bryan Larrieu
895 Bentley Circle
Winter Springs, FL 32708

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: April 18, 2009. (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.)

Jonathan Gregory

Typed or printed name of signer

FILED
09 APR 20 AM 8:27
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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)