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(Address)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 AUG 13 PM 3:25

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GO GREEN PRODUCTS AND SERVICES LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DOMINIKA KASIUK

Name of Person

GO GREEN PRODUCT AND SERVICES

Firm/Company

10151 NW 59TH COURT

Address

PARKLAND FL 33076

City/State and Zip Code

NICK@BECOMETHEBANK.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NICK TORGERSON

Name of Person

at ( 561 )

692 2100

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 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

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GO GREEN PRODUCTS AND SERVICES LLC

(A Florida Limited Liability Company)

Page 1 of 2

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DIVISION OF CORPORATIONS  
12 AUG 13 PM 3:25  
signed

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JILL DEGROTE	1051 NW 59TH COURT	<input type="checkbox"/> Add
		PARKLAND FL 33076	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated 8/9, 2012

Signature of a member or authorized representative of a member

JILL DEGROTE

Typed or printed name of signee