# 098800000

(Req	juestor's Name)	
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PICK-UP	☐ WAIT	MAIL MAIL
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G. MCLEOD

AUG 14 2009

**EXAMINER** 



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DIVISION OF COMME

## COVER LETTER

ž.,	TO:	Registration Division of C						
	SUBJ	ECT:	Blue Gre	en B	lack G	Slobal, Ll	_C.	
			Name of Limit	ted Liab	ility Con	pany		<del> </del>
	The er	closed Articles	of Organization and fee(s) are	submitt	ed for fil	ing.		
	Please	return all corres	pondence concerning this mat	ter to th	e followi	ng:		
			L		Cuerv	0		
			•	Name	or reison			
				Firm/C	Company			
			137		/ 14 St	reet		
				Ad	dress			
					orida 33 and Zip Co			
			luci E-mail address: (to be used	uer@c	omcas	t.net	051	the state of the s
	For fu	rther information	a concerning this matter, pleas		c aimaa n	cport normean		
			G. Cuervo	at (	305	_)		33-0911
		Name	e of Person		Area Co	ode & Daytime	Tele	phone Number
	Enclo	sed is a check	for the following amount:					
	<b>\$125</b>	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	C	ertified (	ling Fee & Copy opy is enclose		[]\$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	es 1 he	Registr Division Cliftor 2661 E	Courier Addration Section on of Corpora Building Executive Cerassee, FL 32	ations	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited I	Liability Company	y is:		
В	lue Green Bla	ck Global, LLC.		
		Liability Company," "L.L.C.," or "LLC.")	_	
ARTICLE II - Address:				
The mailing address and s	street address of th	e principal office of the Limited Liability	Comp	any is:
Principal Office Address	<u>s:</u>	Mailing Address:		
4000 Ponce de Leon B	lvd.	4000 Ponce de Leon Bivd. Suite 470		
Coral Gables, Florida 3	3146	Coral Gables, Florida 33146		
business entity with an active Flo	street address of t	-	09 AUG	SECRE
		G. Cuervo	<u> </u>	= 유턴-
		W 14 Street	A	
F	lorida street address (	(P.O. Box <u>NOT</u> acceptable)	7: 3	٠.
Mia	ami, Florida 331		39	
	City, Sta	ate, and Zip		*:
liability company at th registered agent and agre statutes relating to the p	e place designatea ee to act in this cap proper and complet	d to accept service of process for the above I in this certificate, I hereby accept the appo- acity. I further agree to comply with the pi te performance of my duties, and I am fami registered agent as provided for in Chapter	ointmen rovision liar wit	nt as ns of all h and
	Registered Agent's S	ignature (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:

"MGR" = Manag "MGRM" = Mar	
MGRM	Luis G. Cuervo
	13742 SW 14 Street
	Miami, Florida 33184
MGRM	Maria Virginia Jaramillo-Haime
	16400 Collins Avenue, Suite 646
	North Miami Beach, FL 33160
MGRM	John Macho
	4000 Ponce de Leon Blvd.
	Coral Gables, Florida 33146
MGRM	Alejandro Hernandez
	4000 Ponce de Leon Blvd
	Coral Gables, Florida 33146
(Use attachment	if necessary)
T.F.V. Effective	date, if other than the date of filing: August 10, 2009 . (OPTIONAL
JEDEN V. LINCOLIVO	
ffective date is lis	sted, the date must be specific and cannot be more than five business days
ffective date is list days after the d	sted, the date must be specific and cannot be more than five business days
ffective date is lis	sted, the date must be specific and cannot be more than five business days ate of filing.)
ffective date is list days after the d	sted, the date must be specific and cannot be more than five business days ate of filing.)
ffective date is list days after the d	sted, the date must be specific and cannot be more than five business days ate of filing.)  GNATURE:
ffective date is list days after the d	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

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)