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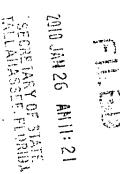
`	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	·
Special Instructions to Filing Officer:	

Office Use Only



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T. CLINE
JAN 2 7 2010
EXAMINER

COVER LETTER

Division of	n Section Corporations		
SUBJECT:	Gr	een Break L.L.C.	
	Name of Limit	ted Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	s of Organization and fee(s) are	submitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
		Peter Gerhold	
		Name of Person	
	Gre	en Break L.L.C.	
		Firm/Company	
	22	01 Wilton Drive	
		Address	2010 TAL
	Wilton N	Manors,Florida 33305	
_	Ci	ty/State and Zip Code	26
	pger E-mail address: (to be used	rhold@msatb.com for future annual report notific	ration) To A
For further information	on concerning this matter, pleas		2010 JAN 26 AH 11: 21 SECRE ASY D SAIL FLERID
Pe	ter Gerhold	at (954)	494-6400
Nar	ne of Person		me 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 enclo	Certificate of Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier A Registration Section Division of Corportion Building 2661 Executive C Tallahassee, FL 3	on orations Center Circle

LAW OFFICES OF ROBERT P. RESKE P.A. 2201 Wilton Drive Wilton Manors, Florida 33305-2131

954/630-0533-OFFICE robertreske@aol.com

954/630-0532 - FAX 954/770-9515 -CELL

January 22, 2010

Peter Gerhold Green Break L.L.C. 2201 Wilton Drive Wilton manors, Florida 33305

pgerhold@msatb.com

Re:Green Break LLC.

Billing Statement

Professional services:

File Articles of Incorporation/ t e- filing

Acceptance of office of registered agent

Filing fees:

Florida Department of State

\$ 155.00

\$150.00

Total due

\$305.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability C	Company is:
Gre	en Break L.L.C. "Limited Liability Company," "L.L.C.," or "LLC.")
(Must end with the words	"Limited Liability Company," "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	ess of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2201 Wilton Drive	2201 Wilton Drive
Wilton Manors,Florida 33305	Wilton Manors, Florida 33305
	<u> </u>
business entity with an active Florida registrati The name and the Florida street add	ress of the registered agent are:
	Name
	2201 Wilton Drive
Florida street	address (P.O. Box <u>NOT</u> acceptable)
Wilton Manor	, Fl. 33305
	City, State, and Zip
liability company at the place de registered agent and agree to act in statutes relating to the proper and	gent and to accept service of process for the above stated limited signated in this certificate, I hereby accept the appointment as this capacity. I further agree to comply with the provisions of all complete performance of my duties, and I am familiar with and ition as registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s)	ARTICLE I	V- Manage	er(s) or Mai	naging M	[ember(s	s):
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The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:	
 "MGR" = Manag "MGRM" = Mar 			
	laging wember		
MGRM	···	Peter Gerhold	
		2201 Wilton Drive	
		Wilton Manor, Fl. 33305	
			
(Use attachment	if necessary)		
TICLE V: Effective	date if other than the d	late of filing:	(OPTIONAL)
an effective date is lis	ted, the date must be	specific and cannot be more than	1 five business days prior
r 90 days after the da		•	• •
DEOLUDED CL	CORT A COLUMN TO		
REQUIRED SIG	GNATURE:		_
	Signature of a member	or an authorized representative of a r	nember.
		ion 608.408(3), Florida Statutes, the executes an affirmation under the penalties of in are true.)	
		Peter Gerhold	
	Typ	ed or printed name of signee	三
Filing Fees:			SE N
\$125 00 Filing I			
	Fee for Articles of Organ	ization and Decimation	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9
	Fee for Articles of Organ istered Agent	ization and Designation	SECTION IN
\$ 30.00 Certific		ization and Designation	