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

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EXAMINER



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ON THE CORPORATIONS



COVER LETTER .

Division of Co	rporations			
SUBJECT: Greenst	ein Group, LLC			
		ed Liability Com	pany	
The enclosed Articles o	f Organization and fee(s) are	submitted for fili	ng.	
Please return all corresp	ondence concerning this matt	er to the followir	ıg:	
Ron Greenste	ein			
		Name of Person		
Greenstein G	roup, LLC			
		Firm/Company		
225 South Ad	ams Street, Suite 250			
		Address		
Tallahassee,	Florida 32301			
,	Cit	y/State and Zip Co	de	
rgreen2505@	aol.com E-mail address: (to be used f	or future annual re	port notification	, , , , , , , , , , , , , , , , , , ,
For further information	concerning this matter, please		port notification	,
To future information	concerning and matter, prease	Curi.		
Ron Greenstein		at (_954	_)610-774	
Name	of Person	Area Co	de & Daytime	Telephone Number
Enclosed is a check for	or the following amount:			
☑\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified C		\$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	Registra Divisio Clifton 2661 E	Courier Addration Section of Corporat Building xecutive Centuses, FL 3230	ions -

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Greenstein Group LLC (Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
225 South Adams Street	225 South Adams Street
Suite 250	Suite 250
Tallahassee, Florida 32301	Tallahassee, Florida 32301
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the responsible Ron Greenstein	
Name	45X 22
225 South Adams Street	Suite 250
Florida street add	ress (P.O. Box NOT acceptable)
Tallahassee	FL 32301
City, Star	te, and Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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	Name and Address:
MGR	Ron Greenstein
	225 South Adams Street suite 250
	Tallahassee, Florida 32301
And the state of t	
	
	
(Use attachment if necessary) CLE V: Effective date, if other that	n the date of filing: (OPTIONAL)
CLE V: Effective date, if other that	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days p
CLE V: Effective date, if other that effective date is listed, the date me 00 days after the date of filing.)	
CLE V: Effective date, if other that effective date is listed, the date me 00 days after the date of filing.) REQUIRED SIGNATURE:	
CLE V: Effective date, if other that effective date is listed, the date me to days after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance wo fithis document)	ust be specific and cannot be more than five business days p
CLE V: Effective date, if other that effective date is listed, the date me to days after the date of filing.) REQUIRED SIGNATURE: Signature of a m (In accordance wo fithis document)	nember or an authorized representative of a member. ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ted herein are true.)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)