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F. HAMPTON

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EXAMINER

## **COVER LETTER**

`TO: '	Registration Section Division of Corporations	.et
SUBJE	CT: Green Steward Energy LLC	
		ed Liability Company
The end	closed Articles of Organization and fee(s) are	submitted for filing.
Please 1	return all correspondence concerning this mat	ter to the following:
7	Whitney Rauh	Name of Person
-	Green Steward Energy	
		Firm/Company
-	106 Dorman Street	Address
		7301033
P	Cirt Charlotte, FL 33953	y/State and Zip Code
<u>v</u>	vhitneyrauh@gmail.com	for future annual report notification)
For furt	her information concerning this matter, please	e call:
Whitne	ey Rauh	at (845 ) 300-9251
	Name of Person	Area Code & Daytime Telephone Number
Enclose	ed is a check for the following amount:	
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy 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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is	:
Green Steward Energy LLC  (Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
106 Dorman Street Port Charlotte, FL 33953	106 Dorman Street Port Charlotte, FL 33953
	<del></del>
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the Kelly Dunn	stered Agent. You must designate an individual or another
Name	
311 Georgetown Ave	
	dress (P.O. Box NOT acceptable)
Melbourne	FL32901
City, Se	ate, and Zip
liability company at the place designated in registered agent and agree to act in this capacit statutes relating to the proper and complete pa	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ty. I further agree to comply with the provisions of al erformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S
Tellyle	N DIVS
Registered Agent's Signa	ture (REQUIRED)

(CONTINUED)

Page 1 of 2

## 

**REQUIRED SIGNATURE:** 

to or 90 days after the date of filing.)

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Whitney Rauh

Typed or printed name of signee

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)

SECRETARY OF STATE DIVISION OF CORPORATIONS