

03/28/2011 12:05

303220170

LAZARUS

PAGE 01/03

http://ems.sunnz.org/scripts/emcovr.exe

L11000037070

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H)1000080750 3)))



H110000807503ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305) 552-5973
Fax Number : (305) 220-1440

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

GREEN LIFE PROJECTS, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED
11 MAR 28 PM 1:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
11 MAR 28 AM 8:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help **J. BRYAN**

MAR 29 2011

EXAMINER

H110000080750

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY****ARTICLE I NAME**

The name of the Limited Liability Company is: **GREEN LIFE PROJECTS, LLC.**

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

**14341 SW 120 ST #103
MIAMI, FL 33186**

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE AND
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the agent are:

ADA GABRIELA RINAUDO

(NAME)

4239 SW 153 CT

FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE)

MIAMI, FL 33186

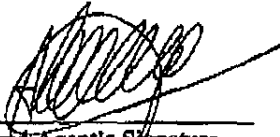
(CITY/STATE/ZIP)

FILED
11 MAR 28 AM 8:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H110000080750

H11000080750

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT AS PROVIDED FOR THE CHAPTER 608, F.S.



Registered Agent's Signature

ARTICLE IV MANAGEMENT

Management of this limited liability company is reversed to its members, whose names and addresses are as follows:

ADA GABRIELA RINAUDO
4239 SW 153 CT
MIAMI, FL 33185

Executed by the undersigned members of the limited liability company this: 25TH day of March, 2011.



Ada Gabriela Rinaudo
Authorized Representative.

FILED
11 MAR 28 AM 8:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H11000080750