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EXAMINER

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CORPDIRECT AGENTS, INC. (form 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 222-1173		erly CCRS)			
FILING COVER S ACCT. #FCA-14	SHEET		TAPR-8		
CONTACT:	RICKY SOT	<u>o</u>	·		
DATE:	04/08/2011				
REF. #:	000177,14605	<u>7</u>			
CORP. NAME: GREENSTONE POINT ENTERPRISES, LLC					
() ARTICLES OF INCO	RPORATION	() ARTICLES OF AMENDMENT	() ARTICLES OF DISSOLUTION		
() ANNUAL REPORT		() TRADEMARK/SERVICE MARK	() FICTITIOUS NAME		
() FOREIGN QUALIFIC	CATION	() LIMITED PARTNERSHIP	(XX) LIMITED LIABILITY		
() REINSTATEMENT		() MERGER	() WITHDRAWAL		
() CERTIFICATE OF CANCELLATION					
() OTHER:					
STATE FEES PREPAID WITH CHECK# 53986 FOR \$ 125.00					
AUTHORIZATION	ON FOR AC	COUNT IF TO BE DEBITE	D:		
	· 	COST LII	MIT: \$		
PLEASE RETUR	en:				
() CERTIFIED COPY	() CE	RTIFICATE OF GOOD STANDING	(XX) PLAIN STAMPED COPY		
() CERTIFICATE OF					

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Greenstone Point Enterprises, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
610 Clematis Street	610 Clematis Street
#711	#711
West Palm Beach, FL 33401	West Palm Beach, FL 33401

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Michael Allen Niegsch Name 610 Clematis Street, #711

Florida street address (P.O. Box NOT acceptable)

West Palm Beach

h FL 33401 City, State, and Zip

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 in Chapter 608, F.S..

Registered Agent's Signature (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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Michael Allen Niegsch 610 Clematis Street, #711 West Palm Beach, FL 33401 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: upon filing _. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** 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.) Michael Allen Niegsch 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)