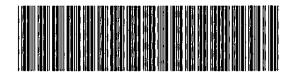
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(Re	equestor's Name))		
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PICK-UP	☐ WAIT	MAIL.		
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Certified Copies	_ Certificate	es of Status		
Special Instructions to Filing Officer:				

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J. SAULSBERRY EXAMINER AUG 10 2011

COVER LETTER

TO:	Registration Section Division of Corporations	ì		
SUBJ	FCT: Green KD P	roperties, L	LC.	
3000			Liability Company	
The er	closed Articles of Organizat	ion and fee(s) are su	abmitted for filing.	
Please	return all correspondence co	ncerning this matte	r to the following:	
	Dionisie Fabiar	1		
			Name of Person	
				2011 AUG -9 AM 8: 46 SECRETARY OF STATE TALLAHASSEE, FLORID
		1	Firm/Company	AUG CRET AHI
	3304 Bridgewoo	d Drive		G-9 AH HASSEE, F
			Address	ma n
	Paga Patan El 3	2424		FLOOR RESTRICT
	Boca Raton, FL 3		State and Zip Code	
	dennfab@gmail.co	-	State and Zip Code	7
			r future annual report notification)	
For fu	rther information concerning	this matter, please	call:	
Dion	isie Fabian		at (845-) 234-9423	
	Name of Person	•	Area Code & Daytime Tele	phone Number
Enclo	sed is a check for the follo	wing amount:		
√ \$125.0		Filing Fee & cate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fce, Certificate of Status & Certified Copy (additional copy is enclosed)
	Registra Division P.O. Bo	Address tion Section of Corporations x 6327 ssee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center (Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Green DK Properties, LLC. (Must end with the words "Limited Liability")	cy Company "LLC" or "LLC")			
	y company. E.E.C., or EEC.)			
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:			
3304 Bridgewood Drive	3304 Bridgewood Drive			
Boca Raton, FL 33434	Boca Raton, FL 33434			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	ared Agent. You must designate an individual or another H			
The name and the Florida street address of the re	gistered agent are:			
Dionisie Fabian	PESTATE ORID			
Name	ORIDE LE			
3304 Bridgewood	Drive Drive			
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)			

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.

City, State, and Zip

Registered Agent's Signature (REQUIRED)

Boca Raton

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	Dionisie Fabian 3304 Bridgewood Dive Boca Raton, FL 33434	
MGR	Ecaterina Fabian 3304 Bridgewood Drive Boca Raton, FL 33434	SECRETARY OF ALLLAHASSEE
		AM 8: 46 OF STATE E. FLORIDA
(Use attachment if necessary) ARTICLE V: Effective date, if other than	n the date of filing:	(OPTIONAL)
(If an effective date is listed, the date mu to or 90 days after the date of filing.)	sst be specific and cannot be more the	an five business days prior
REQUIRED SIGNATURE:		
IA Company	L. John	

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.)

Dionisie Fabian

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)