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.

(((H11000213898 3)))



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:

: LAZARUS CORPORATE FILING SERVICE, INC. Account Name

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. GO GREEN UNITED, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

J. BRYAN

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 3 0 2011



H 1 10 0 0 2 1 3 0 9 0
ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:
(Must end with the words "Limited Liability Company) "L.L.C.," or "I.LC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
\$260 S.W. 11 Terr. 8260 S.W. 11 Terr. Miam, FL 33144.
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:

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

H11000213898

H11000213898

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is a

<u>l'itle:</u> 'MGR" = Manager 'MGRM" = Managing Membe	Name and Address:
MGRM	Magney Beloncourt Wiam, FL3314
MGRH	Scotiago Sangur Tagsio Sub. 1814 Miamo, FC 33176
MGRM_	Laura Santur 12650 s.w. 104 Ave Miam, FL 33176
Use attachment if necessary)	
days after the date of filing.)	nan the date of filing: (OPTIC nust be specific and cannot be more than five business
EV: Effective date, if other tifective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE:	
EV: Effective date, if other tifective date is listed, the date is days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with see constitutes an affirmation is must a signature of a sig	nust be specific and cannot be more than five business

Page 2 of 2