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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 futur annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. GREEN PLOW TECHNOLOGY LLC

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\$130.00

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Corporate Filing Menu

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	ن الله الله الله الله الله الله الله الل
ARTICLES OF ORGANIZATION FOR FIL	ORIDA LIMITED LIABILITY COMEANY
ARTICLE I - Name:	
The name of the Limited Liability Company is:	inc.
	5
GREEN Mow Techr	nology LLC \$5
(Must end with the words "Limited Liabil	lity Constany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9601 SW 9 terr	Same
MIANI, FL 33174	
The name and the Florida street address of the Police Address of the Name Plant Similar Street address of the Name Plant Similar Street address of the Name City, State,	GENA Grante Idress (P.O. Box NOT acceptable)
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p accept the obligations of my position as reg	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 all verformance of my duties, and I am familiar with and istered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Man The name and address of each Mana	naging Member(s): ger or Managing Member is as follows: Name and Address: Jondan Galcia
<u>Fitte:</u>	Name and Address:
'MGR" = Manager 'MGRM" = Managing Member	The second secon
Words - Wastaging Wellioes	7-1-1
MGRA	JORDAN GARCIA
	9601 SW 9 terrace
	Migmi FL 33174 37
MGRM	Ruben Abella
	9601 SW 9 terrore
	Miami FL 33174
• •	
(Use attachment if necessary)	f x
9.	
T.R.V: Effective date, if other than ti	ne date of filing:
T.R.V: Effective date, if other than ti	
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CLE V: Effective date, if other than the effective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a menual days after the date of filing.	be specific and cannot be more than five business days aber or an authorized representative of a member.
CLE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.) REOURED SIGNATURE: Signature of a men	be specific and cannot be more than five business days aber or an authorized representative of a member. 508,408(3), Florida Statutes, the execution of this document
CLE V: Effective date, if other than the effective date is listed, the date must days after the date of filing.) REOURED SIGNATURE: Signature of a men constitutes an affirmation of the papers that any false in the constitutes are false in the con	be specific and cannot be more than five business days aber or an authorized representative of a member. Solo 408(3), Florida Statutes, the execution of this document ander the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State
CLE V: Effective date, if other than the effective date is listed, the date must days after the date of filing.) REOURED SIGNATURE: Signature of a men constitutes an affirmation of the papers that any false in the constitutes are false in the con	be specific and cannot be more than five business days aber or an authorized representative of a member. 508,408(3), Florida Statutes, the execution of this document

Page 2 of 2