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# **COVER LETTER**

TO:	Registration S Division of Co				
SUBJE	ст: <u>N</u>		estments LLC.  ed Liability Company		
The enc	losed Articles o	f Organization and fee(s) are s	submitted for filing.		
Please r	eturn all corresp	oondence concerning this matt	er to the following:		
-	Alan	Greenstein	Name of Person		<del>_</del>
-			Firm/Company		
_	14559	Drafthorse lo	ane		
_	Well		Address		2013 Q
•	a a c o	Cit	3414. y/State and Zip Code  or Cast. net or future annual report notification)		CT 15
_	3,	E-mail address: (to be used f	or future annual report notification)	in Sign	
For furt	her information	concerning this matter, please	call:	2007 その3	PM 4:3
	Alan G Name	reenstein of Person	at (	SZ83 Sin	34
Enclos	ed is a check f	or the following amount:			
□\$125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclose	
		Mailing Address Registration Section Division of Cornerations	Street/Courier Address Registration Section Division of Corporations		

Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:		
Northwood Investme (Must end with the words "Limited Liability	nts LC.  by Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
14559 Drafthorse lane Wellington, FL 334174  ARTICLE III - Registered Agent, Registered	14559 Prafthone lane Wellington, FC 33414  Office, & Registered Agent's Signature:	
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another	7
The name and the Florida street address of the re		-
Alan Greenstein Name	ORI CONTRACTOR	
	ress (P.O. Box <u>NOT</u> acceptable)	
Wellington City, State	FL 33414 te, 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:

"MGR" = Manager "MGRM" = Managing Member	
MGR	Alan Greenstein 14559 Drafthorse lane Wellington FL 33414
MGRM	Blanca Greenstein 14559 Drafthorse lane Wellington, FC 38414
	- 第5点 mm - 12 mm - 1
(Use attachment if necessary)	F SIA
CLE V: Effective date, if other than the ceffective date is listed, the date must loo or 90 days after the date of filing.)	tate of filing: (OPTIONAL)  be specific and cannot be more than five business day

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.)

Alan Greenstein
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)