L160000219491

(Re	questor's Name)	
,	•	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me) ·
(Do	cument Number)	
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





800291543688

10/24/16--01018--027 **155.00

SECHETARY OF STATE
TALLAHASSEE, FLORID

V HERRING DEC - 6 2016

COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	Green Americas, L.L.C.		
SCEGE		imited Liability Company	······································
The encl	osed Articles of Organization and fee(s)	are submitted for filing.	
Please re	eturn all correspondence concerning this r	natter to the following:	
	Linn Kempner, Managing Partner		
		Name of Person	
		Firm/Company	
	10 Iron Horse Road		
		Address	
	Little Rock, Arkansas 72223		
	ljkempner@yahoo.com	City/State and Zip Code	
		ed for future annual report notificat	ion)
For further	r information concerning this matter, plea	ase call:	
	Linn Kempner	501 786-2670	
		Area Code Daytime Telephor	e Number
Enclosed	l is a check for the following amount:		
\$125.00	Filing Fee \$\frac{1}{2}\$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 enclosed)
	Mailing Address	Street Address	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

October 26, 2016

LINN KEMPNER 10 IRON HORSE ROAD LITTLE ROCK, AR 72223

SUBJECT: GREEN AMERICAS, LLC

Ref. Number: W16000072867

We have received your document for GREEN AMERICAS, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 216A00023023

www.sunbiz.org

Division of Corporations P.O. ROY 6397 Tallahaggae Florida 39314

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name: The name of the Limited Liability Company is:	2016 DEC -5 AM 8: 29
Green Americas Water Filtration, L.L.C.	SEUVE MARY OF STATE TALLAHASSEE, FLORIDA
(Must end with the words "Limited Liabil	
ARTICLE II - Address: The mailing address and street address of the principal office of	f the Limited Liability Company is:
Principal Office Address:	Mailing Address:
10 Iron Horse Road	10 Iron Horse Road

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:

10 Iron Horse Road Little Rock, Arkansas 72223

URS Agents, L.L.C.		
	Name	
3458 Lakeshore Dri	ve	
Florida street addres	is (P.O. Box <u>NOT</u> acc	eptable)
Tallahassee	Florida	32313
City	State	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 605, E.S..

URS Agents, L.L.C.

Christian Eubanks, Assistant Secretary

Little Rock, Arkansas 72223

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

		U	mited Liability Company:	
Title:	uthorized Member	Name and Address:	2016 DEC -5	
"MGR" = Man			SEUNETARY TALL AHASSET	JF 817
MGR	14501	Linn Kempner	TALLAHASSEE	E. FĽÖI
		10 Iron Horse Drive	2	_
		Little Rock, Arkansas 7222	23	-
	<u></u>			-
				_
				_
				_
				_
				-
				
				-
				_
(Use attachmen	nt it necessary)			
ffective date is li e of filing.)	isted, the date must be spec	f filing: ific and cannot be more than five b	ousiness days prior to or 9	-
effective date is li se of filing.) If the date inserte	isted, the date must be speced in this block does not me to date on the Department of	ific and cannot be more than five be set the applicable statutory filing req	ousiness days prior to or 9	-
effective date is line of filing.) If the date inserte cument's effective	ed in this block does not me e date on the Department of ovisions, if any.	et the applicable statutory filing req	ousiness days prior to or 9	
ffective date is li e of filing.) If the date inserte cument's effective	ed in this block does not me e date on the Department of ovisions, if any.	et the applicable statutory filing req	ousiness days prior to or 9 uirements, this date will no	-
ffective date is li e of filing.) If the date inserte nument's effective	ed in this block does not me e date on the Department of ovisions, if any. SIGNATURE: Signature of a mem	et the applicable statutory filing requests a records. State's records.	ousiness days prior to or 9 uirements, this date will no	ot be lis
fective date is lied of filing.) If the date inserteument's effective	ed in this block does not me the date on the Department of the date of t	et the applicable statutory filing req	ve of a member. 13 (1) (b), Florida Statutes to the Department of State	ot be lis
ffective date is lie of filing.) If the date inserte ument's effective LE VI: Other pro	ed in this block does not me the date on the Department of the ovisions, if any. Signature of a mem This document is executed I am aware that any false in constitutes a third degree f	et the applicable statutory filing requests a state in accordance with section 605.02 information submitted in a document	ve of a member. 13 (1) (b), Florida Statutes to the Department of State	ot be lis
ffective date is li e of filing.) If the date inserte nument's effective	ed in this block does not me the date on the Department of the ovisions, if any. Signature of a mem This document is executed I am aware that any false in constitutes a third degree f	et the applicable statutory filing requests a state in accordance with section 605.02 information submitted in a document	ve of a member. 13 (1) (b), Florida Statutes to the Department of State	ot be lis
ffective date is li e of filing.) If the date inserte cument's effective	ed in this block does not me the date on the Department of the ovisions, if any. Signature of a mem This document is executed I am aware that any false in constitutes a third degree f	et the applicable statutory filing requests a state of st	ve of a member. 13 (1) (b), Florida Statutes to the Department of State	ot be lis
ffective date is lie of filing.) If the date inserte cument's effective. CLE VI: Other pro- REOUIRED S	ed in this block does not me the date on the Department of the ovisions, if any. Signature of a mem This document is executed I am aware that any false in constitutes a third degree f	et the applicable statutory filing requests a state of st	ive of a member. 103 (1) (b), Florida Statutes to the Department of State F.S.	ot be lis