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(Re	equestor's Name)	
(Ad	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(B	usiness Entity Nan	ne)
(De	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

N. SAMS JAN 2 7 2017



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17 JAN 27 MAIN: 5



COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: 60 Green Siding LLC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kyle A. Hetner Name of Person
rame of Person
Firm/Company_
2251 Hwy 98 East
Curro he//t #132327
Wyotce 420 @ 9mail, com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	FILED
60 Green Siding LLC	17 JAN 27 PM 12: 09
(Must end with the words "Limited Lizoility Company, "L.L.C.," or "LLC.")	1.77
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	TALLAHALISEE, FLORISA
Principal Office Address: Mailing Address:	
2251 Hay 98 East 2251 Hay 98 East	
Carrabelle, FL 32322 Carrabelle, FL 32	13/1
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 another business entity with an active Florida registration.)	or

The name and the Florida street address of the registered agent are:

ADTICLE L. Names

7 Nan

2231 HWY 78

Florida street address (P.O. Box NOT acceptable)

(arrahelle

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, F.S..

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Memb	Name and Address:
'MGR" = Manager	.1
-M6-A	<u> </u>
1101	
V.1. 11.11.	2251 HWV 98 East
Tyle HETTER	2231 MWY 10 F431
	Cocrohelle, Fl 32322
'Ina attachment if negacions)	
EV: Effective date, if other the ctive date is listed, the date in filing.)	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90
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ARTICLE IV-

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