L1700 148592

(Re	questor's Name)	
(Ad	dress)	
(Àd	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

M. MOON JUL 12 2017



800301121088

OSC BECEIVE BY W 22

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 717,997 8130947
AUTHORIZATION: Spreis Remander.
COST LIMIT : \$ 155.00
ORDER DATE : July 11, 2017
ORDER TIME : 3:10 PM
ORDER NO. : 717997-005
CUSTOMER NO: 8130947
DOMESTIC FILING NAME: GREEN SCIENCE LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Melissa Zender - EXT.
EXAMINER'S INITIALS:

COVER LETTER

	New Filing Section Division of Corporations			
SUBJEC'	Green Science LLC			
SUBJEC,		f Limited Liabil	ity Company	
The enclo	sed Articles of Organization and fee((s) are submitted	for filing.	
Please reti	urn all correspondence concerning th	is matter to the f	ollowing:	
		Paul G.	Prince	
		Name of	Person	-
		Brick & P	atel LLP	
		Firm/Co	mpany	-
	1290 /	Avenue of the Ai	nericas, 34th Floor	17.
		Addr	rss .	
		New York,	NY 10104	
		City/State an pprince@bric	-	- `.
	E-mail address: (to be		nnual report notification)	- .
For further	information concerning this matter, p	olease call:		
	Paul Prince	212	554-5270	
	Name of Person	Area Code	Daytime Telephone Number	
Enclosed	is a check for the following amount:			
\$125.00 F	Filing Fee \$130.00 Filing Fee Certificate of Statu	s La Certifi	0 Filing Fee & S160.00 Filing Fee, ed Copy al copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		reen Science LLC		
(Must co	ontain the words "Limited	Liability Company	r, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	t address of the principal o	office of the Limite	d Liability Company is:	
Princ	ripal Office Address:		Mailing Address:	
145	15 Cypress Island Cir		14515 Cypress Island C	ir
Palm Be	each Gardens, Fl. 33410		Palm Beach Gardens, FL 33	410
nother business entity with a	in active Florida registrati	on.) d agent are:	. You must designate an individu	al or
nother business entity with a	et address of the registere Corporation Service	on.) d agent are:	. 1 ou must designate an individu	17 ·
nother business entity with a he name and the Florida stree	et address of the registere Corporation Service 1201 Hays Street	on.) d agent are: Company Name		
nother business entity with a	et address of the registere Corporation Service	on.) d agent are: Company Name		
nother business entity with a	et address of the registration of the registere Corporation Service 1201 Hays Street Florida street address Tallahassee	on.) d agent are: Company Name ss (P.O. Box NOT) FL	acceptable)	17
nother business entity with a	et address of the registere Corporation Service 1201 Hays Street Florida street address	on.) d agent are: Company Name ss (P.O. Box NOT	acceptable)	17 ·

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:		Name and Address:
	Authorized Member	
"MGR" = M:	anager	Croon Salamaa Manayamaat I.I.C
MGR		Green Science Management LLC 14515 Cypress Island Cir
		Palm Beach Gardens, FL 33410
		rann Beach Gardens, 112 33410
<u></u>	·· ·	
	 _	
		
	 	
(11)	.:0	
(Use anacnm	ent if necessary)	
e date of filing.) ote: If the date inser e document's effecti RTICLE VI: Other p	rted in this block does not meet the average on the Department of State	d cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as s records.
REQUIRED	SIGNATURE:	
	This document is executed in ac-	an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statutes, ation submitted in a document to the Department of State
	Paul G. Pri	ince, Authorized Signatory 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)