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2020 FEB 28 AM IO: 50 SECRETARY OF STATE TALL AHASSEE, FL

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DATE:

2/28/20

NAME:

GREEN BILL, LLC

TYPE OF FILING: ARTICLES

COST:

125.00

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	lew Filing Se Division of Co					
•	Green Bil	II. LLC				
SUBJECT	Γ:			<u> </u>		
		Nan	ne of Limit	ed Liabili	y Company	•
The enclos	sed Articles of	f Organization and	fee(s) are s	submitted:	or filing.	
		ondence concernin			•	
r icase retu	•		g uns maue	er to the it	mowing:	
	Christophe	r Paulick				
				Name of I	Person	
	Green Bill,	LLC				
					<u></u>	
				Firm/Con	пралу	
	1200 Brick	cil Ave. Suite #19:	50			
				Addre		
	Miami, FL	33131				
	chris@green	shill ara	City	//State and	Zip Code	·
			ha ugad fo	- fitues as		
					nual report notificati	100)
For further i		oncerning this matte	r, please c	all:		
	Christopher	Paulick	305	5	632-3351	
			at (
	Nan	ne of Person	Area	a Code	Daytime Telephon	e Number
Englosed is	e a check for t	the following amou	nt.			
		•				
⊔\$ 125.00	Filing Fee	LI\$130.00 Filing Fee & Certificate of Status		□\$155.00 Filing Fee & Certified Copy		☐\$160.00 Filing Fee, Certificate of Status &
			_		copy is enclosed)	Certified Copy
						(additional copy is enclosed)
	Mailie	ng Address		•	itreet Address	
		iling Section			New Filing Section Di	ivision
	Divisi	on of Corporations		7	he Centre of Tallaha	issee
		30x 6327			415 N. Monroe Stre	
Tallahassee, FL 32314				Tallahassee, FL 32303		

ARTICLESOF	FILED		
ARTICLE I - Name: The name of the Limited Liability Company is:			2020 FEB 28 AM 10: 50
Green Bill, LLC			SECRETARY OF STATE TALLAHASSEE, FL
· (Must cona	MELANASSEE, FL		
-		f the Limited Liability Company is:	· .
<u>Principa</u>	al Office Address:	Mailing Addres	<u>s</u> :
1200 Brickell Ave. Sui	te # 1950	1200 Brickell Ave. Suite # 1950	
Miami, H. 33131		Miami, Fl. 33131	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own Regist active Florida registration.)	ered Agent. You must designate an indiv	ridual or
	Christopher Paulick		
	Name	е	
	1200 Brickell Ave. Suite #19:	50	
	Florida street address (P.O.	Box NOT acceptable)	

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 ny position as registered agent as provided for in Chapter 605, F.S.

Miami.

City

(CONTINUED)

Florida

State

Zip

ARTICLE IV-

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

. · <u>"</u> A	tle: AMBR" = Authorized Mer	mber	Name and Address:		
· "A	//GR" = Manager		Christopher Paulick - Manager		
			1200 Riscayne Blvd. Suite #1950		
			Miami, Fl. 33131		
_					
					2
				——CR	20 F)
				<u> </u>	EB 2
				TARY OF	28
					AM 10: 50
					⇔
				一当	50
(L	Jse attachment if necessar	у)		111	
DTICLE	V. Effective data if other	than the date of	filing: March 1, 2020 (OPTIONAL)	.	
			fic and cannot be more than five business days prior to		r
ne date of	· · · · · · · · · · · · · · · · · · ·		······································	•	
Note: If th	e date inserted in this blo		et the applicable statutory filing requirements, this date w	ill not be listed	as
he docume	ent's effective date on the	Department of	State's records.		
משוביו בי	1/1- Od :: ::				
RIICLE	VI: Other provisions, if an	ıy.			
•	 -				
R	<u>eouired</u> signatur	E: COS	on Dove		
	Signa	ature of a memb	ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Sta	tuter	
			formation submitted in a document to the Department of		
	constitutes	a third degree fe	elony as provided for in s.817.155, F.S.		
	Chris	stopher Paulick			
		7	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)