122000121883

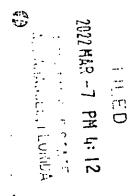
	equestor's Name)	
(R	equestors Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	<u> </u>
•		
PICK-UP	☐ WAIT	MAIL
		
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
		ł
		İ
		

Office Use Only



500382913295

03/07/22--01043--010 **130.00





COVER LETTER

		CO	VER LETT	TER	295) 3073	20
	ew Filing Sectivision of Con					2022 HAR -
SUBJECT		ONIC GREEN INVESTOR	RS LLC		· .	
0020201	•	Name of Lin	nited Liabil	ity Company		PH 4: 12
The enclose	ed Articles of	Organization and fee(s) are	e submitted	for filing.		~ ~
Please retu	rn all corresp	ondence concerning this ma	itter to the f	following:		
	HOWARD	W. BERNSTEIN				
			Name of	Person		_
			Firm/Co	mpany		
	9573 Campi	Drive				_
			Addr	ess		
	Lake Worth,	FL 33467				
ì	howieb957@		ity/State an	d Zip Code		_
_)	E-mail address: (to be used	for future a	nnual report notificati	on)	
For further in	nformation co	ncerning this matter, please	call:			
	Howard W. H	Bernstein at (561	968-8363		
	Nam	e of Person A	rea Code	Daytime Telephon	e Number	
Enclosed is	a check for t	he following amount:				
.\$125.00	Filing Fee	■\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing For Certificate of Status Certified Copy (additional copy is encoded)	&
		ng Address iling Section		Street Address	vicion	
		on of Corporations		New Filing Section Di The Centre of Tallaha		
	P.O. B	ox 6327 assee, FL 32314		2415 N. Monroe Stree Tallahassee, FL 3230		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Brown Burerone 11	2		
	REEN INVESTORS., LLo entain the words "Limited I		IIC "or "IIC")	
(Musi co	mani die words Embled i	Liabinty Company,	E.E.C., or ELC.	
RTICLE II - Address: he mailing address and street	address of the principal o	ffice of the Limited I	Liability Company is:	
Principal Office Address:			Mailing Address:	
9573 Campi Drive, Lake Worth,FL 33467		9573	9573 Campi Drive, Lake Worth, FL 33467	
				
·	in active Florida registratio	on.)	ou must designate an individual or	
•	in active Florida registratio	n.) I agent are:	ou must designate an individual of	
•	an active Florida registration tetrated and registered	n.) I agent are:	ou must designate an individual of	
•	et address of the registered Howard W. Bernstei	nn.) I agent are: n Name		
·	et address of the registration Howard W. Bernstei	nn.) I agent are: n Name		
•	et address of the registered Howard W. Bernstei	nn.) I agent are: n Name		
·	et address of the registered Howard W. Bernstei 9573 Campi Drive Florida street addres	on.) d agent are: Name S (P.O. Box NOT ac	cceptable)	
ace designated in this certificant rther agree to comply with the	et address of the registered Howard W. Bernstei 9573 Campi Drive Florida street addres Lake Worth City ed agent and to accept servate, I hereby accept the apper provisions of all statutes r	nn.) I agent are: Name Name S (P.O. Box NOT ac Florida State ice of process for the pointment as registere elating to the proper	cceptable) 33467 Zip above stated limited liability company of agent and agree to act in this capacity and complete performance of my duties	
The name and the Florida stre aving been named as registere ace designated in this certifica orther agree to comply with the	et address of the registered Howard W. Bernstei 9573 Campi Drive Florida street addres Lake Worth City ed agent and to accept servate, I hereby accept the apper provisions of all statutes r	nn.) I agent are: Name Name S (P.O. Box NOT ac Florida State ice of process for the pointment as registere elating to the proper	cceptable) 33467 Zip above stated limited liability company and agree to act in this capacit	
The name and the Florida stre aving been named as registere ace designated in this certifica orther agree to comply with the	et address of the registered Howard W. Bernstei 9573 Campi Drive Florida street addres Lake Worth City ed agent and to accept servate, I hereby accept the apper provisions of all statutes r	nn.) I agent are: Name Name S (P.O. Box NOT ac Florida State ice of process for the pointment as registere elating to the proper	cceptable) 33467 Zip above stated limited liability company of agent and agree to act in this capacity and complete performance of my duties	

(CONTINUED)

2022 MAR -7 PM 4: 12

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Howard W. Bernstein
	9573 Campi Drive Lake Worth, FL 33467
	Lake Worth, I L 55-07
MGR	Elinor C. Bernstein
	9573 Campi Drive
	Lake Worth, FL 33467
(Use attachment if necessary)	
he document's effective date on the Depa RTICLE VI: Other provisions, if any, jurpose: Investment in Hydroponic Farms	
REQUIRED SIGNATURE:	
<u> </u>	oward Remotein
Signature	of a member or an authorized representative of a member.
This document i	s executed in accordance with section 605.0203 (1) (b), Florida Statutes.
t am aware that a constitutes a thir	any false information submitted in a document to the Department of State d degree felony as provided for in s.817.155, F.S.
Flanned V	W. Namarata
rioward v	V. Bernstein Typed or printed name of signee
	Ciling Force
\$125.00 Filing Fee for Article	Filing Fees: s of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Opti	ousl)
\$ 5.00 Certificate of Status	
	The state of the s

R-7 PM 4:1

as