

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000122002

Entity Name: LEWIS TRIANGLE FARMS, LLC

Current Principal Place of Business:

408 SE 7TH STREET
JASPER, FL 32052

Current Mailing Address:

408 SE 7TH STREET
JASPER, FL 32052 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEWIS, HORACE GSR.
408 SE 7TH STREET
JASPER, FL 32052 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGRM
Name LEWIS, HORACE GSR.
Address 408 SE 7TH STREET
City-State-Zip: JASPER FL 32052

Title MGRM
Name LEWIS, MARGARET
Address 408 SE 7TH STREET
City-State-Zip: JASPER FL 32052

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HORACE GERALD LEWIS

03/10/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date