

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Sep 15, 2002 8:00 am
Secretary of State

09-15-2002 90091 024 ****50.00

DOCUMENT # L01000015528

1. Entity Name

Bhavani Vegetable, L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

11765 S.Orange Blossom Tr

Suite, Apt. #, etc.

D

City & State

Orlando, FL

Zip

32837

Country

Orange

3. Mailing Address

1215 River Oak Drive

Suite, Apt. #, etc.

City & State

Fort Meade, FL

Zip

33841

Country

Polk

4. FEI Number

59-3742683

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Binita Patel

Street Address (P.O. Box Number is Not Acceptable)

1215 River Oak Drive

City

Fort Meade

FL

Zip Code

33841

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

**TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**

MGRM

Binita Patel

1215 River Oak Drive
Fort Meade, FL 33841

**TITLE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Binita Patel

Date

(407) 438-5010

Daytime Phone #

CR2E083B (12/01)