

LD600008666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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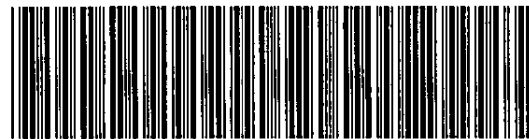
(Business Entity Name)

(Document Number)

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D. BRUCE  
DEC 16 2016

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Country Fruit & VEGGIE LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SELMA HERMANSSON

Name of Person

Country Fruit & VEGGIE LLC

Firm/Company

6945 SW 66 AVE

Address

MIAMI, FL 33143

City/State and Zip Code

acbtrading@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SELMA HERMANSSON

Name of Person

at (305) 661-7943

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee      ☐ \$30.00 Filing Fee & Certificate of Status      ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)      ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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COUNTRY FRUIT & VEGGIE, LLC

The Articles of Organization for this Limited Liability Company were filed on 9/5/2006 and assigned Florida document number L06000086666

Page 1 of 3

**If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:**

**MGR = Manager**

**AMBR = Authorized Member**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BLANCO, HENRY R.	6945 SW 66 AVE	<input checked="" type="checkbox"/> Add
		Miami, FL 33143	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated DECEMBER 13, 2016

Signature of a member or authorized representative

SELMA HERBMANIS

SELMA HERMANSSON

Typed or printed name of signee

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2016 DEC 15 PM 11:46  
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TALLAHASSEE, FLORIDA  
Pursuant to 605.0207