

L11000098188

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

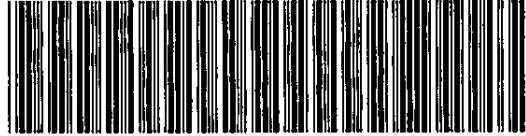
(Business Entity Name)

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CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA

NOV 23 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: U & B Farm, 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:

Uziel Rodriguez
Name of Person

U & B Farm LLC
Firm/Company

14423 129th Road
Address

Live Oak, FL 32060
City/State and Zip Code

diversifiedaccountingservices@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Uziel Rodriguez at (386) 294-1380 x227
Name of Person 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

Y & B Farm, LLC

Page 1 of 3

MGR = Manager
AMBR = Authorized Member

☐ Charge
☐ Add
☐ Remove
☐ Change

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

(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)

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 November 17th, 2015

Uziel Rodriguez
Signature of a member or authorized representative of a member

Uziel Rodriguez
Typed or printed name of signer

Filing Fee: \$25.00

2015 NOV 20 PM 2:12
ST. JOHN'S COLLEGE
TALLAHASSEE, FLORIDA