

L13000106473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

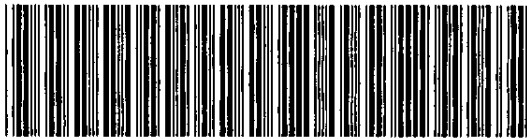
(Business Entity Name)

(Document Number)

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08/26/13--01023--031 **25.00

SEP 03 2013
D. BUTLER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Fresh Fit Foods, 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:

Mr. Richard Crawford

Name of Person

Firm/Company

999 Vanderbilt Beach Rd., Ste. 102

Address

Naples, FL. 34108

City/State and Zip Code

Rbolin@crawfordgrp.com

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

For further information concerning this matter, please call:

Kent M. Amo

Name of Person

at **(239) 450-4719**

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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Fresh Fit Foods, LLC

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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

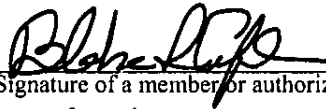
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Chad O'Connor	999 Vanderbilt Beach Rd., Ste. 102	<input checked="" type="checkbox"/> Add
		Naples, FL 34108	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

• _____
• _____
• _____
• _____
• _____

Dated August 21, 2013



Signature of a member or authorized representative of a member

Blake S. Crawford

Typed or printed name of signee

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Filing Fee: \$25.00

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