

L14 000 174755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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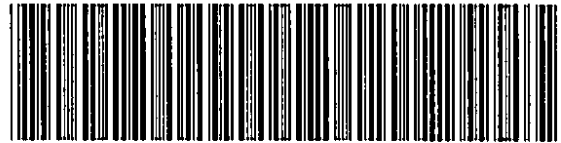
(Business Entity Name)

(Document Number)

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T. LEMUEUX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VANGUARD FOODS TRADING 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:

RONALD CHUMACEIRO

Name of Person

VANGUARD FOODS TRADING LLC

Firm/Company

11310 NW 64th TERRACE

Address

DORAL, FLORIDA 33178

City/State and Zip Code
vft.miami@gmail.com

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

For further information concerning this matter, please call:

RONALD CHUMACEIRO

813 508-2359
at ()

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

VANGUARD FOODS TRADING LLC

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>
MBR	HELENA FARGIER	1200 WEST AVE, MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	YARITZA ROSALES	3750 NW 114th AVE, S-2, DORAL, FL 33178	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Monsch R. Chistian	5580 NW 84 AVE Doral, FL 33166	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Pocaterra, Frank	5580 NW 84 AVE Doral, FL 33166	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	Etcheverry, Carlos	5580 NW 84 AVE Doral, FL 33166	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

The LLC Partnership's member shares participation is distributed as follows:

RONALD CHUMACEIRO (26%): Managing Member

HELENA FARGIER (25%): Member

JORGE SIMON (25%): Member

YARITZA ROSALES (24%): Member

E. Effective date, if other than the date of filing: _____ (optional)

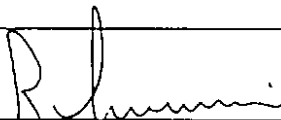
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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 May 10, 2019



Signature of a member or authorized representative of a member

RONALD CHUMACEIRO

Typed or printed name of signee