1500029647

(Requestor's Name)				
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(Addr	ACE)			
(·	<i></i>			
(City/s	State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Busi	ness Entity Na	me)		
(Docu	ument Number)		
Certified Copies	Certificate	s of Status		
Special Instructions to Fi	ling Officer:			

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COVÉR LETTER

TO:	Registration Se Division of Cor		`	•			
CIID IE	3 BROTH	HERS PRODUCE LLC					
SUBJE	∟1: <u> </u>	Name of Lim	ited Liability Company				
		Amendment and fee(s) are substance concerning this matter	-				
		Vanessa Steib					
			Name of Person				
		VANESSA STEIB LI	_C				
		v	Firm/Company				
		1725 Everest Pkwy			SE0.	15 1	٠.٠٠
			Address			F. 20	14 24-44
		Cape Coral, Fl. 3390	04			0	,,,,,,,
			City/State and Zip Code		,_,		
		vansteib@aol.com				υį	
For furt	her information o	concerning this matter, please c	to be used for future annual report notifi all:	ication;			
Vanes	ssa Steib		954 290-8116				
	Name o	of Person		: Telephone Number			
Enclose	d is a check for t	he following amount:					
□ \$25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy	□ \$60.00 Filing Certificate	Filing Fee, cate of Status &		
		Check 1024	(additional copy is enclosed)	Certified Co (additional co		losed)	
	34 A 17	INC ADDRESS.	ctdeet/coudi	ED ADDDECC.			

TO:

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

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



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FLORIDA DEPARTMENT OF STATE OF A STATE Division of Corporations

March 23, 2015

VANESSA STEIB VANESSA STEIB LLC 1725 EVEREST PKWY CAPE CORAL, FL 33904

SUBJECT: 3 BROTHERS PRODUCE LLC

Ref. Number: L15000029647

We have received your document for 3 BROTHERS PRODUCE LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date cannot be prior to or more than 90 days after the date of filing in this office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 515A00005761

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06 PARTHENI OF STATE BIVISION OF CORPORATION

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3 BROTHERS PRODUCE LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 02/17/2015 and assigned Florida document number L15000029647 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
Owner/MGR	Vanessa Steib	1725 Everest Pkwy	■ Add
		Cape Coral, FI 33904	☐ Remove
Owner/MGR	Adelyaana Hernandez	1411 County Road 830 A	■ Add
		Felda, Fl. 33930	□ Remove
			Remove
			□ Remove
			Addi
			□ Remove
			□ Add
		·	☐ Remove

). If amér	nding any other information, e	nter change(s) here: (Attach add	itional sheets, if necessary.)
		 	
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	ve date, if other than the date of ctive date must be specific, cannot be pre- this document is filed by the Florida De	of filling: ior to date of receipt or filed date and cann epartment of State)	ot be more than 90 days after
Dated	March 02	2015 /	
Daicu_			
	Signati	are of a member or authorized representat	live of a member
	VANESSA STEIB		
		Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00