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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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EFFECTIVE DATE $5 \cdot 18 \cdot 15$



MIN MAY 21 P 2: 22

JUN 1 0 2015 T SCHROEDER



May 22, 2015

REGGY TJOE 425 WINTERSIDE DR APOLLO BEACH, FL 33572

SUBJECT: LETTUCE FEED YOU GOOD, LLC

Ref. Number: W15000036477

We have received your document for LETTUCE FEED YOU GOOD, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

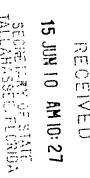
You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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) 245-6051.

Terri J Schroeder Regulatory Specialist II

Letter Number: 515A00010895



COVER LETTER

TO:

Registration Section

Div	ision of Co	rporations			
SUBJECT:	LETTUCI	E FEED YOU GOOD, I	LLC		
		Name of	Limited Liabi	lity Company	
The enclosed	d Articles of	Organization and fee(s) are submitte	d for filing.	
Please return	all corresp	ondence concerning this	s matter to the	following:	
	Reggy Tjoe				
-			Name o	f Person	
	Lettuce Fee	d You Good, LLC			
_			Firm/C	ompany	
•	425 Winters	side Drive			
-			Add	ress	
	Apollo Beac	ch, FL 33572			
re	ggy_t@yah	oo.com	City/State a	nd Zip Code	
		E-mail address: (to be u	sed for future	annual report notifica	tion)
For further inf	ormation co	ncerning this matter, pl	ease call:		
F	Reggy Tjoe	at	941	544-6961	
<u></u>	Nan	ne of Person	Area Code	Daytime Telephor	ne Number
Enclosed is a	a check for t	he following amount:			
\$125.00 Fili		\$130.00 Filing Fee & Certificate of Status	Certif	00 Filing Fee & ied Copy nal copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address		Street Address	
		ration Section		Registration Section	·
		on of Corporations ox 6327		Division of Corporat Clifton Building	ions
		assee Fl 32314		2661 Executive Cent	er Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liab	ility Company is:		EFFECTIVE DATES-18.15
Lettuce Feed You			
(Must en	d with the words "Limite	d Liability Company	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street	address of the principal of	office of the Limited	Liability Company is:
Princ	ipal Office Address:		Mailing Address:
425 Winterside Dr	ive	425	Winterside Drive
Apollo Beach, FL	33572	Apo	llo Beach, FL 33572
The name and the Florida stree	Reggy Tjoe	Name	
·	425 Winterside Driv Florida street addres		ponetala)
	Profiqa su eet audres	ss (F.O. Box MOT ac	eceptable)
	Apollo Beach	Florida	33572
	City	State	Zip
lace designated in this certificat urther agree to comply with the p	e, I hereby accept the app provisions of all statutes re obligations of my position	ointment as registere elating to the proper	above stated limited liability company at the old agent and agree to act in this capacity. I and complete performance of my duties, and I as provided for in Chapter 605, F.S
		(CONTINUED)	

Page 1 of 2

2015 HAY 21 P 2: 22

Title: "AMBR" - Authorized Member	Name and Address:
"MGR" = Manager	
Reggy Tjoe	425 Winterside Drive
	Apollo Beach, FL 33572
Patchara Nettrakun	116 Morrow Cir
	Brandon, FL 33510
MGR = Wanager	
	
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(Use attachment if necessary)	
of filing.)	and cannot be more than five business days prior to or 90 one applicable statutory filing requirements, this date will not be
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Signature of a member (In accordance with section 60 constitutes an affirmation under I am aware that any false informations at third degree felon Typ \$125.00 Filing Fee for Articles of Organiza \$30.00 Certified Copy (Optional)	and cannot be more than five business days prior to or 90 of the applicable statutory filing requirements, this date will not be state's records. For an authorized representative of a member, 15.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.) The document of signee Filing Free:
Signature of a member (In accordance with section 60 constitutes an affirmation under I am aware that any false inforcementiates a third degree felon Typ \$125.00 Filing Fee for Articles of Organiza	and cannot be more than five business days prior to or 90 of the applicable statutory filing requirements, this date will not be state's records. For an authorized representative of a member, 15.0203 (1) (b), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State by as provided for in s.817.155, F.S.) The document of signee Filing Free:

ARTICLE IV-