

L190000174378

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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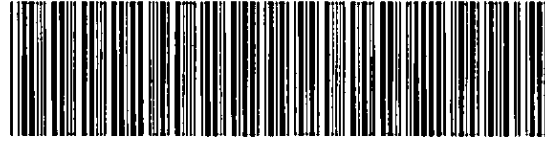
(Business Entity Name)

(Document Number)

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2021 JAN 13 PM 4:50  
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LHA  
2/18/21

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Produce Distributors 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:

Reynold Benitez  
Name of Person

\_\_\_\_\_  
Firm/Company

11924 W. Forest Hill Blvd Suite 10A  
Address

West Palm Beach, FL 33414  
City/State and Zip Code

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

For further information concerning this matter, please call:

Reynold Benitez at (561) 234-7190  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**Mailing Address:**

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

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Produce Distributors LLC

**If Changing Registered Agent, Signature of New Registered Agent**

[illegible]

[illegible]

(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.

Dated 1/8/2021 2021

Signature of a

Signature of a member or authorized representative of a member

Reynold Beritoz  
Typed or printed

Typed or printed name of signee

**Filing Fee: \$25.00**