FILED
Sep 11, 2003 8:00 am
Secretary of State
07-28-2003 90065 010 ****50.00

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

7/21

DOCUMENT # L97000001433

1. Entity Name

ADLER FARMS, L.C.

55096283

Principal Place of Business	Mailing Address
6 TRENT COURT MORRISTOWN NJ 07960	6 TRENT COURT MORRISTOWN NJ 07960

[redacted]

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
95 Firmenich Way		95 Firmenich Way	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Newark, N. J.		City & State Newark, N. J.	
Zip 07114	Country ESSEX	Zip 07114	Country ESSEX

4. FEI Number NOT APPLICABLE. ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ADLER, STEVEN H 5530 NW 98TH LANE OCALA FL 34482	Name Same Agent - New Address Street Address (P.O. Box Number Is Not Acceptable) 95 Firmenich Way City NEWARK N.J FL Zip Code 07114

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ADLER, STEVEN H ~~6 TRENT COURT~~ ~~MORRISTOWN NJ 07960~~ ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 95 Firmenich Way Newark, N.J. 07114
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STEVEN H. ADLER ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGMR. STEVEN H. ADLER 8951 S.E. 219th AVE, MORRISTON, FL. 32668 ☒ Change ☑ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E083 (4/03)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

attachment

55056283
#L97000001433

Steven H. Adler
3931 S.E. 219th Ave.
Morriston, Fl. 32668

September 5, 2003

Florida Dept. of State
Div. of Corporations
P.O. Box 6478
Tallahassee, Fl. 32314

Dear Sir or Madam:

I am the registered agent for Adler Farms, L.C. and my Florida address is:

3951 S.E. 219th Ave.
Morriston, Fl. 32668

Thank you, in advance, for your kind attention to this matter.

Very truly yours,

Steven H. Adler