N/5000aa/6

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only

Minua



800269224038

02/18/15--01010--018 **78.75

15 MAR -3 AM 8: 22
TALLAHASSEE, FLORIE

MAR = 4 2015 S. GILBERT

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

÷

US TOMATO FARMERS

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

\$70.00 Filing Fee **\$78.75** Filing Fee & Certificate of Status

\$78.75

Filing Fee & Certified Copy \$87.50

Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

Name (Printed or typed)

800 TRAFALGAR CT. #300

Address

MAITLAND, FL 32751

City, State & Zip

407-660-1949

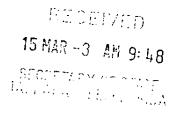
Daytime Telephone number

REGGIE@FLORIDATOMATOES.ORG

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

NOTE: Please provide the original and one copy of the articles.





FLORIDA DEPARTMENT OF STATE Division of Corporations

February 20, 2015

REGINALD L. BROWN 800 TRAFALGAR CT, #300 MAITLAND, FL 32751

SUBJECT: US TOMATO FARMERS Ref. Number: W15000012609

We have received your document for US TOMATO FARMERS and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

Please return the corrected original and one copy of 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) 245-6052.

Sylvia Gilbert Regulatory Specialist II New Filing Section

Letter Number: 915A00003624

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the	NAME US TOMATO	FARMER	RS, INC.)
ARTICLE II	PRINCIPAL OFFICE		15 MAR - 3 AM o.	0.0
800	Principal <u>street</u> address: TRAFALGAR COURT		Mailing address, it differentials: UF STA	TE TOA
SUI	TE 300			•
MA	ITLAND, FL 32751			
(b) To promote, en	r which the corporation is organized is:	lerly and efficient prod	of persons having a common business interest in the United States to uction, packaging, distribution: and sale of fresh United Sta	ites tomatoes.
			g, packaging, sale and distribution of fresh United Stat	
			onsumers and other allied interests by public relations activities, promotion fair to consumers, as well as producers, based upon crop and ma	
(f) To pro	vide legal services on matte MANNER OF ELECTION _ The ma		ct the United States tomato in	dustry.
Elected by	membership at annual meeting			
ARTICLE V	INITIAL OFFICERS AND/OR DI	RECTORS		
Name and Title	Edward Beckman, COO	Name and Title	Bob Giampaoli, CEO	
Address	13401 E. Jefferson St.	Address:	13401 E. Jefferson St.	
	LeGrand, CA 95333		LeGrand, CA 95333	
Name and Title:	Billy L. Heller, Jr., Co-CEO/COO	Name and Title:	Jeffrey Dolan, Field Operation Mgr.	
Address	503 10th Street, West	Address:	1406 N. Street	
	Palmetto, FL 34220		Newman, CA 95360	
Name and Title	:	Name and Title		
Address		Address:		
		. 100:000.		
			·	

COVER LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: US TOMATO FARMERS, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for:

\$70.00 \$78.75

Filing Fee Filing Fee & Certificate of Status

□\$78.75 □ \$87.50

Filing Fee Filing Fee,
& Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: REGINALD L. BROWN
Name (Printed or typed)

800 TRAFALGAR CT. #300

Address

MAITLAND, FL 32751

City, State & Zip

407-660-1949

Daytime Telephone number

REGGIE@FLORIDATOMATOES.ORG

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

NOTE: Please provide the original and one copy of the articles.

Address	Address	s:	
			-
	Name a		
			-
ARTICLE VI The name and Flor	REGISTERED AGENT rida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	Reginald L. Brown		
Address:	800 Trafalgar Ct., Suite 300		
	Maitland, FL 32751	-	
ARTICLE VII	INCORPORATOR ress of the Incorporator is:		
Name:	Reginald L. Brown		
	800 Trafalgar Ct., Suite 300		
Address:	Maitland, FL 32751		
Having been name certificate, l'am fai	ed as registered agent to accept service of proces miliar with and accept the appointment as register	red agent and agree to act in this capacity	
Frank	Vh 1	2/26/15	
	Required Signature of Registered Agent	Date	
l/subjuit this docum	nent and offirm that the facts stated herein are tru of State constitutes a third degree felony as provide	ue. I am aware that any false information submit led for in s.817.155. F.S.	tted in a docume
w me wepamment.	Z N Province		
o me veparment	8/1	2/26/15	

.

. .