

709014

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

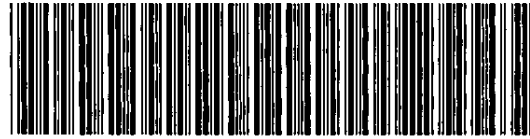
(Business Entity Name)

(Document Number)

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12 OCT 26 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** Florida Forestry Association, Inc.  
**DOCUMENT NUMBER:** 709014

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Sisco  
Name of Contact Person  
Florida Forestry Association  
Firm/ Company  
402 E. Jefferson St.  
Address  
Tallahassee, FL. 32301  
City/ State and Zip Code  
marys@forestfla.org  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Sisco at (850) 222-5646  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- ☒ \$35 Filing Fee  
☐ \$43.75 Filing Fee & Certificate of Status  
☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)  
☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**COVER LETTER**

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OCT 24 2012

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 16, 2012

MARY SISCO  
FLORIDA FORESTRY ASSOCIATION, INC.  
402 E JEFFERSON ST  
TALLAHASSEE, FL 32301

SUBJECT: FLORIDA FORESTRY ASSOCIATION, INC.  
Ref. Number: 709014

We have received your document for FLORIDA FORESTRY ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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.

Tina Roberts  
Regulatory Specialist II

Letter Number: 412A00025450

RECEIVED  
12 OCT 26 AM 9:12  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Articles of Amendment  
to  
Articles of Incorporation  
of

Florida Forestry Association, Inc.  
(Name of Corporation as currently filed with the Florida Dept. of State)

709014

(Document Number of Corporation (if known))

FILED  
12 OCT 26 PM 3:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

N/A

*The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

N/A

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

N/A

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent:

Alan Shelby  
402 E. Jefferson St.

(Florida street address)

New Registered Office Address:

Tallahassee

(City)


Florida

32301

(Zip Code)

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

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

  
Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action  
(Check One)

Title

Name

Address

- |  |            |                       |  |
|--|------------|-----------------------|--|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>PD</u>  | <u>Bryan Olmert</u>   | <u>25755 NW 130th Ave.</u><br><u>High Springs, FL.</u><br><u>32643</u> |
| 2) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>PD</u>  | <u>Lynetta Griner</u> | <u>P.O. Box 843</u><br><u>Chiefland, FL</u><br><u>32644</u>            |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>EVP</u> | <u>Jeff Doran</u>     | <u>402 E. Jefferson St.</u><br><u>Tallahassee, FL.</u><br><u>32301</u> |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>EVP</u> | <u>Alan Shelby</u>    | <u>402 E. Jefferson St.</u><br><u>Tallahassee, FL.</u><br><u>32301</u> |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>VPD</u> | <u>Lynetta Griner</u> | <u>P.O. Box 843</u><br><u>Chief land FL.</u><br><u>32644</u>           |
| 6) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>VPD</u> | <u>Michael Dooner</u> | <u>305 W. Shortwell St.</u><br><u>Bainbridge, GA</u><br><u>39819</u>   |

The date of each amendment(s) adoption: 9-7-12

Effective date if applicable: 9-7-12  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 10/25/12

Signature 

(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Alan Shelby  
(Typed or printed name of person signing)

Executive Vice President  
(Title of person signing)