

NO80000000233

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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\_\_\_\_\_  
(Business Entity Name)

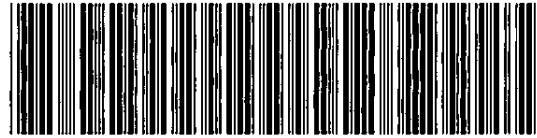
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Robens APR 03/2

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** SKUNKIE ACRES, INC

**DOCUMENT NUMBER:** N 08000001233

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

Please return all correspondence concerning this matter to the following:

BARBARA J. HAAKE  
(Name of Contact Person)

SKUNKIE ACRES, INC.  
(Firm/ Company)

608 NW Sophie DR  
PO Box 342 - MAILING  
(Address)

WHITE SPRINGS FL 32096  
(City/ State and Zip Code)

For further information concerning this matter, please call:

BARBARA J. HAAKE at ( 386 ) 397 1464  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$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

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED  
08 MAR 31 PM 3:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SKUNKIE ACRES, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

N08000001233

(Document number of corporation (if known))

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:

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Change of ownership - see attached

new owners

Barbara Haake and MEGAN HAAKE

Po Box 342 - MAILING

608 NW Sophie Dr. - Physical

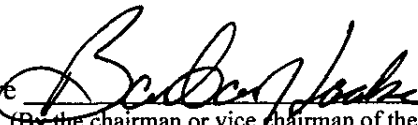
White Springs, Florida 32096

The date of adoption of the amendment(s) was: 3/24/08

Effective date if applicable: 3/24/08  
(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 was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

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.)

BARBARA J. HAAKE  
(Typed or printed name of person signing)

owner  
(Title of person signing)

**FILING FEE: \$35**

I, Lora Gretchen Haake, do hereby transfer all rights in Skunkie Acres Riding Stables and Skunkie Acres, Inc and Circle H Christian Amusements to Barbara J. Haake and Megan A. Haake. This transfer includes all livestock and equipment.

Dated this 19 Day of March, 2008.

Lora Gretchen Haake  
Lora Gretchen Haake

Debra Stephens  
Witness

Debra Stephens  
Witness

Affiant Known Unknown ID Produced

State of Florida, County of Columbia

On this 19 Day of March 2008 before me Lora Gretchen Haake personally appeared, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the written instrument and acknowledged to me that she executed the same in her authorized capacity and that by her signatures on the instrument the persons or the entity upon behalf of which the person acted, executed the instrument.

WITNESS My Hand and Official Seal:

Jarodanne Rentz  
Signature

NOTARY PUBLIC-STATE OF FLORIDA  
Jarodanne Rentz  
Commission # DD444940  
Expires: JUNE 26, 2009  
Bonded Thru Atlantic Bonding Co., Inc.