N09000010843

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(Reque	estor's Name)	
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(City/S	tate/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busin	ess Entity Nai	me)
(Docur	ment Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fili	ng Officer:	
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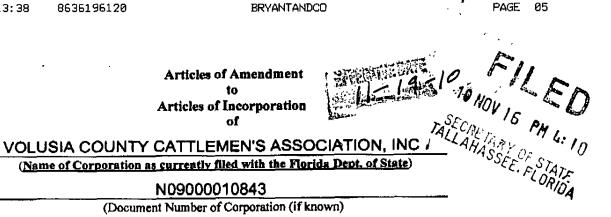
TO: Amendment Section Division of Corporations

8636196120

NAME OF CORP	ORATION: VOLUSIA COU	INTY CATTLEMEN'S	ASSOCIATION IN	
DOCUMENT NUI	MBER: N09000010843			
The enclosed Article	les of Amendment and fee are subn	nitted for filing.		
Please return all con	rrespondence concerning this matte	τ to the following:		
		EY LEFILS		
	(Name of C	Contact Person)		
	VOLUSIA COUNTY CATT	LEMEN'S ASSOCIATION	INC	
(Firm/Company)				
3100 EAST NEW YORK AVENUE				
	(A	ddress)		
		D, FL 32724		
(City/ State and Zip Code)				
lefilsj@bellsouth.net E-mail address: (to be used for future annual report notification)				
For further informa	tion concerning this matter, please	•	±11011)	
TOT MICHEL INIONIA	der concerning the matter, presse			
JEFFREY LEFIL		at (386) 775-698 (Area Code & Daytir	9	
(Nam	nc of Contact Person)	(Area Code & Daytin	ne Telephone Number)	
Enclosed is a check	for the following amount made pa	yable to the Florida Department	t 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)	
	iling Address	Street Address		
	endment Section ision of Corporations	Amendment Section Division of Corporation	ens.	
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Tallahassec, FL 32301		

8636196120

Articles of Amendment Articles of Incorporation



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

N09000010843

(Document Number of Corporation (if known)

contain the word "corporation" or "in	corporated" or the
or "Co." may not be used in the name.	
plicable: ETADDRESS)	
EE ICE BOX)	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
registered office address in Florida, e	nter the name of the
ustered office adoress:	
	
(Florida street address)	
(Florida street address) (City)	, Florida(Zip Code)
	or "Co." may not be used in the name. plicable: ET ADDRESS) E: ICE BOX

Page 1 of 3

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O THE FEDERA NY SUCH ASSE JRISDICTION C DCATED, EXCL	L GOVERNMENT, OR TO A ITS NOT SO DISPOSED OF S IF THE COUNTY IN WHICH USIVELY FOR SUCH PURPO	STATE OR LOCAL GOVERNI HALL BE DISPOSED OF BY A THE PRINCIPAL OFFICE OF DSES OR TO SUCH ORGANIZ	OR SHALL BE DISTRIBUTED MENT FOR A PUBLIC PURPOSE COURT OF COMPETENT THE ORGANIZATION IS THEN ATION OR ORGANIZATIONS, ATED EXCLUSIVELY FOR SUC

The date of each amendment	t(s) adoption: NOVEMBER 10, 2010
Effective date if applicable:	(date of adoption is required) NOVEMBER 19, 2010
	(no more than 90 days after amendment file date)
·	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or adopted by the board of dis	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
DatedSignature	11-10-11 Deff lle
(B)	the chairman or vice chairman of the board, president or other officer-if directors
	e not been selected, by an incorporator — if in the hands of a receiver, trustee, or
otn	er court appointed fiduciary by that fiduciary)
	Jeffrey LEFIJS
	(Typed or printed name of person signing)
	Vice Président
	(Title of person signing)

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