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TALLAHASSEE, FL

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	COONHUNTERS ASS	——————————————————————————————————————	леи
DOCUMENT NUMBER: N11000002146			
The enclosed Articles of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this ma	tter to the following:		
SHANNON JAMES SMITH			
	(Name of Contact Pers	on)	
FLORIDA STATE COONHUNTERS ASSOCIATI	ON INCORPORATED		
	(Firm/ Company)		
179 GLOVER LANE			
	(Address)		
CRAWFORDVILLE, FL 32327			
	(City/ State and Zip Co	le)	
twcoondog@yahoo.com			
E-mail address: (to be use	ed for future annual repor	notification)	
For further information concerning this matter, pleas	se call:		
SHANNON JAMES SMITH	S at	0 528-1038	
(Name of Contact Perso		rea Code) (Daytime Te	lephone Number)
Enclosed is a check for the following amount made p	payable to the Florida De	partment 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	Amer	Address dment Section on of Corporations	

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

N11000002146

(Name of Corporation as currently filed with the Florida Dept. of State) FLORIDA STATE COONHUNTERS ASSOCIATION INCORPORATED (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: A. If amending name, enter the new name of the corporation: 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. 179 Glover Lane B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Crawfordville, FL 32327 C. Enter new mailing address, if applicable: 179 Glover Lane (Mailing address MAY BE A POST OFFICE BOX) Crawfordville, FL 32327 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: Shannon James Smith Name of New Registered Agent: 179 Glover Lane (Florida street address) New Registered Office Address: Crawfordville _, Florida <u>32327</u> (*Zip Code)* (City) 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: X Change X Remove X Add	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add	P	Shannon James Smith	179 Glover Lane Crawfordville, FL 32327
Remove 2) Change Add	<u>P</u>	Morell J Davis	28 Juniper Trail Ocala, FL 34480
X Remove	V	Michael Crawley	1427 Benjamin Chaires Rd Tallahassee,FL 32317
4) Change Add	V	Earl Bellemore	6375 Dixie Wav Mims. FL 32754
 X Remove 5) Change X Add Remove 	<u>T</u>	Dylan Hill	17 Kristin Lane Crawfordville, FL 32327
6) Change Add	S/T	Deborah Dickard	2417 NE 6th ST Apt 10 Ocała, FL 34470
E. If amending or addin (attach additional shee		nal Articles, enter change(s) here: exary). (Be specific)	

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: X Change X Remove X Add	PT John De V Mike Jo SV Sally Sr	<u>ines</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
Change X Add	<u>S</u>	Carli McFalls	1946 Woodland Rd Cairo, GA 39827
Remove			
2) Change Add	BD	Billy Ray Roberts	99 Old Nails Rd Crawfordville, FL 32327
Remove 3)			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			
E. If amending or addin (attach additional sheet		cles, enter change(s) here: (Be specific)	

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The date of each amendment(s) adoption:date this document was signed.		<u>.</u>		, if other than	n the
Effective date if applicable:					
			_		
(no mo	re than 90 days af	ter amendment fi	le date)	 	

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

(<u>CHECK ONE</u>)

Adoption of Amendment(s)

= SUSL
(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Shannon James South

Florida State Coonhunters Association

State Meeting minutes 2/12/2022

Member clubs

Central Florida CHA

St. Marks River CHA

Chipola River CHA

Central City CHA

North Florida CHA

Indian River CHA

Outgoing Officers:

President-

Morell Davis

Vice-President Earl Bellemore

Treasurer/Sec Deborah Dickard

Officer Nominations and Elections

New Officers:

President-	Shannon James Smith	
	179 Glover Lane Crawfordville, FL 32327	850-528-1038
Vice-President-	Michael Crawley	
	1427 Benjamin Chaires Rd Tallahassee, FL 32317	850-544-9984
Treasurer-	Dylan Hill	
	17 Kristin Lane Crawfordville, FL 32327	850-524-1642
Secretary-	Carli McFalls	
	1946 Woodland Rd Cairo, Ga 39827	717-953-6522
FRC-	Billy Ray Roberts	
	99 Old Nails Rd Crawfordville, FL 32327	850-251-3954

Discussion of State Hunt & Youth Events

Meeting adjourned