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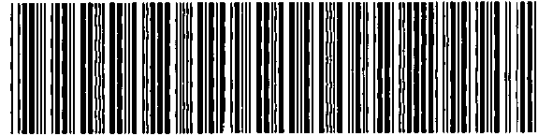
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date of formation - 4/3/09
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

~~8/23/12~~ AUG 23 2012

FF \$105

8/14/12

Certificate of Conversion

For

Limited Agricultural Association into **Florida Not For Profit Corporation**

This Certificate of Conversion and **attached Articles of Incorporation** are submitted to convert the following **Limited Agricultural Association into a Florida Not For Profit Corporation** in accordance with Sections 604.14 and 617.1809, Florida Statutes.

1. The name of the Limited Agricultural Association immediately prior to the filing of this Certificate of Conversion is **Union County Farm Bureau, LAA.** 790980
2. The Limited Agricultural Association was initially formed under ss.604.09-604.14, Florida Statutes, on **04/03/1969**
3. The name of the Florida Profit Not For Profit Corporation as set forth in the **attached Articles of Incorporation** is **Union County Farm Bureau, Inc.**
4. **FEI/EIN Number:** 590866417 **Email Address:** Leslie.Snyder@fbic.com
5. If not effective on the date of filing, enter the effective date: _____

Signed this 7th day of AUGUST, 2012

Required Signature for Florida Not For Profit Corporation: Individual signing attests that the facts stated in this document are true. Any false information constitutes a third degree felony as provided for in s.817.155, F.S.

Signature of Incorporator: Edward Shadd

Printed Name: EDWARD SHADD Title: President

Signature(s) of all person(s) required by Limited Agricultural Association's Articles of Association or Bylaws:

Signature: Edward Shadd

Printed Name: EDWARD SHADD

Address: PO Box 205 KATFORD, FLA 32083

Title: President

Signature: Karen Cossey

Printed Name: Karen Cossey

Address: 750 E. Main St. Lake Butler, FL 32054

Title: Vice President

Signature: _____

Printed Name: _____

Address: _____

Title: Secretary/Treasurer

Signature: Tommy Crawford

Printed Name: Tommy Crawford

Address: 9591 SW 65th Ter. Lake Butler, FL 32054

Title: Director

Signature: Tommy Crawford

Printed Name: _____

Address: _____

Title: Director

Signature: Alvin A. Griffiths

Printed Name: Alvin A. Griffiths

Address: 11207 NE CR 793, Raiford, FL 32083

Title: Director

Signature: W. Ebery Griffiths

Printed Name: 9022 South County Rd. 231

Address: W. Ebery Griffiths

Title: Director

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

ARTICLE I NAME

The name of the corporation shall be **UNION COUNTY FARM BUREAU, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal Office Address:

325 SE 6th Street
Lake Butler, FL 32054

Mailing Address, if different, is:

Same

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ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Section 1. To promote, foster and encourage more efficient and progressive agriculture.

Section 2. To enable the farmers and growers of Florida to enjoy the manifold benefits of joint and collective effort.

Section 3. To work for the solution of the problems of the farm, the farm home, and rural community, by the use of recognized advantages of organized action, to the end that those engaged in the various branches of agriculture may have opportunity for happiness and prosperity in their chosen work.

Section 4. To represent, protect and advance the social, economic and educational interests of farmers in Florida.

Section 5. To cooperate with Florida Farm Bureau Federation and through it, with the American Farm Bureau Federation, and with the Agricultural Extension Service in bringing their resources to the farmers of Florida.

Section 6. To do and perform any and all acts and things necessary, proper, convenient or desirable for and to affect the full and complete exercise and enjoyment of any and all of the powers and purposes of the Corporation hereby created.

This Corporation does not contemplate pecuniary gain to the members thereof.

ARTICLE IV DIRECTORS

The property, affairs, business, and operation of the Corporation shall be managed by a Board of Directors, which shall be elected as provided in the Bylaws.

ARTICLE V OFFICERS

The officers of the Board shall consist of a President, a Vice President, a Secretary, a Treasurer, and such other officers as may be elected or appointed. All officers shall be elected or appointed as provided in the Bylaws.

ARTICLE VI INITIAL OFFICERS AND/OR DIRECTORS

The officers who are to conduct the business of the Corporation until their successors are elected and qualified are as follows:

President and Director Edward Shadd
Address P O Box 205
City, State, Zip RAIFORD, FL 32083

Vice President and Director Karen Cossey
Address 750 E. Main St.
City, State, Zip Lake Butler, FL 32054

Secretary/Treasurer and Director Kathrynne Duffin
Address 9022 SCR 231
City, State, Zip Lake Butler, Fla 32054

Director _____

Address _____

City, State, Zip _____

Director _____

Address _____

City, State, Zip _____

Director _____

Address _____

City, State, Zip _____

Director _____

Address _____

City, State, Zip _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** of the Registered Agent is:

Name: ~~Elery Griffis~~ Edward Shadd

Florida Street Address: 325 SE 6th Street
Lake Butler, FL 32054

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Edward Shadd

Florida Street Address: 325 SE 6th Street
Lake Butler, FL 32054

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Edward Shadd
Required Signature of Registered Agent

8-7-12
Date

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Edward Shadd
Required Signature of Incorporator

8-7-12
Date