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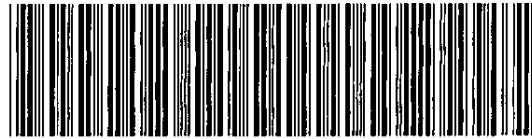
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TALLAHASSEE, FLORIDA

FILED

Aug 23 2012

Rec'd. 8/7/12

FF \$105

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 **Collier County Farm Bureau, LAA.** 790439
2. The Limited Agricultural Association was initially formed under ss.604.09-604.14, Florida Statutes, on 06/12/1967
3. The name of the Florida Profit Not For Profit Corporation as set forth in the **Articles of Incorporation** is **Collier County Farm Bureau, Inc.**
4. **FEI/EIN Number:** 596177720 **Email Address:** Lorena.Herrera@ncfb.org
5. If not effective on the date of filing, enter the effective date: _____

Signed this 2 day of AUGUST, 2012

Required Signature for Florida Not For Profit Corporation: Individual signing affirms 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: William C Hoffman

Printed Name: William C. Hoffman Title: President

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

Signature: William C Hoffman

Printed Name: William C. Hoffman

Address: 1505 Paloma Dr. Fort Myers, FL 33901

Title: President

Signature: Kevin Seitzinger

Printed Name: Kevin Seitzinger

Address: 1075 Port Orange Way Naples, FL 34120

Title: Vice President

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Signature: Gina C. Blocker
Printed Name: Gina C. Blocker
Address: 970 18th AVE NE
Title: Secretary/Treasurer

Signature: Floyd Crew
Printed Name: FLOYD CREW
Address: 5214 LAKE LANE
Title: Director

Signature: Jack W Johnson Jr
Printed Name: Jack W Johnson Jr
Address: PO BOX 5003 IMMOKALEE FL 34143
Title: Director

Signature: Henry P Howard
Printed Name: HENRY P HOWARD
Address: P.O. BOX 154 IMMOKALEE FL. 34143
Title: Director

Signature: _____
Printed Name: _____
Address: _____
Title: Director

Signature: _____
Printed Name: _____
Address: _____
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 **COLLIER COUNTY FARM BUREAU, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal Office Address:

Mailing Address, if different, is:

1011 West Main Street
Suite 2
Immokalee, FL 34142

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 WILLIAM C. HOFFMAN
Address 1505 PALOMA DR.
City, State, Zip FT. MYERS FL. 33901

Vice President and Director KEVIN SEITZINGER
Address 1075 PORT ORANGE WAY
City, State, Zip NAPLES FL. 34120

Secretary/Treasurer and Director GINA BLOCKER
Address 970 18TH AVE. NE
City, State, Zip NAPLES FL. 34120

Director FLOYD CREWS
Address P.O. Box 610
City, State, Zip IMMOKALEE FL. 34143

Director HUEY HOWARD
Address P.O. Box 154
City, State, Zip IMMOKALEE FL. 34143

Director JACK JOHNSON JR.
Address P.O. Box 5003
City, State, Zip IMMOKALEE FL. 34143

Director RUSSELL PRIDDY
Address P.O. Box 930
City, State, Zip IMMOKALEE FL. 34143

Director MATTHEW STACEY
Address 15694 ANGELICA DR.
City, State, Zip ALVA FL. 33920

ARTICLE VI REGISTERED AGENT

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

Name: **Larry Smith**

Florida Street Address: 1011 West Main Street
Suite 2
Immokalee, FL 34142

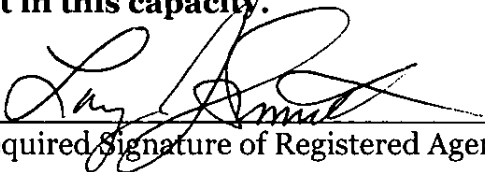
ARTICLE VII INCORPORATOR

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

Name: **William C. Hoffman**

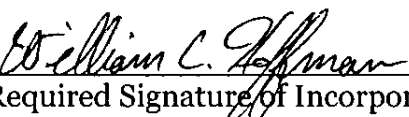
Florida Street Address: 1011 West Main Street
Suite 2
Immokalee, FL 34142

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.


Required Signature of Registered Agent

8/2/12
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.


Required Signature of Incorporator

8/2/12
Date