N12000008254

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	→ #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nan	ne)
(Do	ocument Number)	
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SECRETARY OF STATEMS
DIVISION OF CORPORATIONS
12 NOV 26 APH 4: 06

NOV 2 8 2012 T. ROBERTS



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 9, 2012

KRIS STELL ORANGE CO FARM BUREAU, INC. P O BOX 1329 CHRISTMAS, FL 32709

SUBJECT: ORANGE COUNTY FARM BUREAU, INC.

Ref. Number: N12000008254

We have received your document for ORANGE COUNTY FARM BUREAU, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pages 3 and 4 are missing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina Roberts Regulatory Specialist II

Letter Number: 712A00027271

RECEIVED

12 NOV 26 AM 10: 12

BERASINENT G. STATE
INISTRACTOR OF THE TALL A MASSEE. PLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Orange County Farm Bureau, Inc
DOCUMENT NUMBER: N1200008254
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kris Stell
(Name of Contact Person)
Orange Co. Farm Bureau, Inc. (Firm/ Company)
Po Box 1329
(Address)
Christmas FL 32709 (City/ State and Zip Code)
Kris. Stell@ffbic.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at (407) (37) 7727 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Amendment Section District of Generalized

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

. (Name of Corporation as currently filed with the Flo	ARNI BUREAU, JNC orida Dept, of State)	•
(Document Number of Corpor	ration (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the f	following
A. If amending name, enter the new name of the corporat	tion:	
NIA		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ation" or "incorporated" or the abbreviation "Corp." o	r "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	, NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	OINSTORE SECRE
		2 9
D. If amending the registered agent and/or registered office and registered agent and/or the new registered office a	ice address in Florida, enter the name of the address:	6 PA L
Name of New Registered Agent: James	m, knox	; 06
1830 M	bodison luy CIC	-
New Registered Office Address:	(Florida street address)	
)KQ , Florida 33713 (Zip Code)	3_
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa	Agent: amiliar with and accept the obligations of the position.	
Janus h	Stered Agent, if changing	
oignature of New Regis	mereu agent, ij chunging	

Page 1 of 4

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)

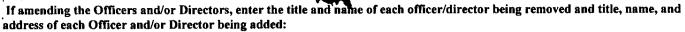
Please note the officer/director title by the first letter of the office title:

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	<u>V</u> <u>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	only	A. Kathrein Markle	2422 Leila Lee Ct. Ocoel FL 34761
2) Change Add	PD	James M. Koox	1830 madison lyy Cir Apopka FL 32712
Remove 3) Change Add	V D	David word	1703 Taylor Creek Rd. Christmas FL 32709
4) Change Add Remove	_D_	Jennifer Parrish	Sha7 Donforth Rd Wintermere FL347806
5) Change Add Remove	<u></u>		
6) Change Add			

Page 2 of 4



(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.

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Example: \underline{X} Change \underline{X} Remove \underline{X} Add	<u>V Mi</u>	nn Doe ke Jones lly Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
1) ChangeAdd	only	A. Kothrein Markle	2422 Leila Lee Ct. Ocoel FL 34761		
Remove 2) Change Add	PD	James M. Koox	1830 modison lyy Cir Apopka FL 32712		
Remove 3)Change Add	V_D	David word	1703 Taylor Creek Rd. Christmas Fl 32709		
4) Change Add Remove	_D_	Jennifer Parrish	Sha7 Donforth Rd Wintermere FL347801		
5) Change Add Remove					
6) Change Add			· .		

If amending or adding additiona attach additional sheets, if necessor	I Articles, enter of the specifical (Be specifical).	change(s) here: ic)			
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T	he date of each amendment(s) adoption:
E	ffective date if applicable:
	(no more than 90 days after amendment file date)
A	doption of Amendment(s) (CHECK ONE)
70	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
E	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 11-20-12
	Signature Strice
	(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)
	(Typed or printed name of person signing)
	(Typed of printed name of person signing)
	Sec/Hamin Host
	(Title of person signing)

P) 454