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Certificate of Conversion

e,

For

Limited Agricultural Association into Florida Not For Profit Corporation

This Certificate of Conversion and <u>attached Articles of Incorporation</u> are submitted to convert the following <u>Limited Agricultural Association into a Florida Not For Profit Corporation</u> 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 **Martin County Farm Bureau**, **LAA**.
- 2. The Limited Agricultural Association was initially formed under ss.604.09-604.14, Florida Statues, on **June 29, 1950**.
- 3. The name of the Florida Profit Not For Profit Corporation as set forth in the **attached Articles of Incorporation** is **Martin County Farm Bureau**, **Inc**.

4. FEI/EIN Number: 596177729 Email Address: Linda.Mulholland fibi com
5. If not effective on the date of filing, enter the effective date:
Signed this 10 day of September, 2012
Required Signature for Florida Not For Profit Corporation: Individual signing afterms that the facts stated in this document are true. Any false information constitutes a the felony as provided for in s.817.155, F.S.
Signature of Incorporator: held Island
Signature of Incorporator: M. H. J. T. Printed Name: William R. Taylor T. Title: President
Signature(s) of all person(s) required by Limited Agricultural Association's Articles of
Association or Bylaws: Signature:
Printed Name: William R. Taylor M
Address: P.6. Bux 165 Palmy Eth FL 34991
Title: President
Signature:
Printed Name: REED HARTMAN
Address: 4565 NE NIGH VIEW TER SEWSEN BOYCAFE SYASO
Title: Vice President

Signature:
Printed Name: Ethan Gally
Address: 1208 St. Clerty Ave PSL, FL. 34953
Title: Secretary Preasurer
Signature: 7 m Wasan
Printed Name: Eric Ni358 h
Address: POBON573 Hope Sound Fl 3345675
Title: Director
Signature: Manual Signature:
Printed Name: Robert Snxle
Address: 3651 5 KANNE Ha 1 STUART [1 34994]
Title: Director
Signature:
Address: 919 SW 317 St Pam City +134990
Title: Director
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Signature: Www. July 10/10/10/10/10/10/10/10/10/10/10/10/10/1
Printed Name: Michelle MWally
Address: 809 SE Dolphin Dr Strent TI 34996
Title: Director / / / /
Signature: Coll hory
Printed Name: John Scott Long
Address: P.O. Box 938
Title: Director
Signature:
Printed Name:
Address:
Title: Director
Signature:
Printed Name:
Address:
Title: Director
Signatura
Signature:
Printed Name:
Address: Title: Director
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ARTICLES OF INCORPORATION

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

ARTICLE I NAME

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

ARTICLE II PRINCIPAL OFFICE

The purpose for which the corporation is organized is:

Principal Office Address:

Mailing Address, if different, is:

506 SW Federal Hwy

Same

Suite 102

Stuart, FL 34994

ARTICLE III PURPOSE

<u>Section 1</u>. 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.

<u>Section 4.</u> 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.

<u>Section 6</u>. 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 <u>fulline</u> J ₂ L TK Address <u>Poblar</u> 105
Address Por Bux 105
City, State, Zip Rober City Fi 34991
Vice President and Director AFFD HARTMAN
Address 4565 NE HIGH VIEW TER
City, State, Zip JENSEN BEACH FC 34957
Secretary/Treasurer and Director Ethny Bailey Address 1008 5W Liberty Ave . City, State, Zip PSL, FL. 34957
Address 1008 5W Liberty Ave.
City, State, Zip PSL, FL. 34957

Director Fre Nisseh
Address POBOX533
City, State, Zip Hope Sound Fl 33455
Director - Robert Snxla
Address 3151 S. KAmner Ha 1
City, State, Zip <u>Strant F</u> / 34994
Director Tina M. Haggerts
Address 919 SW 318 St
City, State, Zip Palm Coty F134990
Director Michally
Address 809 SE DOLPITIN DR
City, State, Zip StVant F1 34996
Director John S. Long
Address P.o. Box 938
City, State, Zip Palm City FL 34991
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: John S. Long

Florida Street Address:

506 SW Federal Hwy

Suite 102

Stuart, FL 34994

ARTICLE VII INCORPORATOR

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

Name: William R. Taylor, III

Florida Street Address:

506 SW Federal Hwy

Suite 102

Stuart, FL 34994

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

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

Date