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O: Amendment Section Division of Corporations	3020
Lake Gibson FFA Alumni Association Inc. NAME OF CORPORATION:	1326
N17000008533 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Rebecca Carroll Rebecca Carroll	
(Name of Contact Person)	
Lake Gibson FFA Alumni	
(Firm/ Company)	
5337 N Socrum Loop Road Suite 224	
(Address)	
Lakeland, FL 33809	
(City/ State and Zip Code)	
lgffaalumni@gmail.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Rebecca Carrol Rebecca Carrol at 863 808-8462	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
S35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
Mailing Address Street Address	

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

Mac Mar Lake Gibson FFA Alumni Assocation Inc.

(Name of Corporation as cur	rently filed with the Florida Dept. of State)
N1700008533	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	<u>ration:</u>
Lake Gibson FFA Alumni Association, Inc.	The ne
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Corp." or "Inc.
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	355)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Mutting dauress MAT BE A FOST OFFICE BOX)	
D. If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered office	ce address:
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
new negmered office radicas.	
	(City), Florida (Zip Code)
	· •
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	
	Signature of New Registered Agent, if changing
	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: \underline{X} Change \underline{X} Remove \underline{X} Add	<u>V</u>	John Doe Mike Jon Sally Sm	<u>ies</u>		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change	Т		Rebecca Carrol 1	Reberca Carro	15337 N Socrum Loop Road
X Add					Suite 224
Remove					Lakeland, FL 33809
2) Change	S		Brittney Thompson	n-Self	5337 N Socrum Loop Road
X Add					Suite 224
Remove					Lakeland, FL 33809
3) Change					***
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add			-	 	
Remove					
6) Change			·		
Add					
Remove					

(attach additional sheets, if necessary). (Be specific) The new treasurer and secretary wasn't named when the originally filed. The bank needs them listed to make changes to the				

		10/4/2017	
	ach amendment(s) adopt ment was signed.	ion:	, if other than the
Effective det	8/16/20 e <u>if applicable</u> :	7	
Effective date	е п аррисаоле:	(no more than 90 days after amendment fi	le date)
	date inserted in this block of fective date on the Depart		equirements, this date will not be listed as the
Adoption of	Amendment(s)	(<u>CHECK ONE</u>)	
	ndment(s) was/were adopte sufficient for approval.	ed by the members and the number of votes of	east for the amendment(s)
	e no members or members by the board of directors.	entitled to vote on the amendment(s). The a	mendment(s) was/were
	Dated 10/4/2017	D 11/1/2	
	Signature	Mill	
		n or vice chairman of the board, president or o	
		elected, by an incorporator – if in the hands opinted fiduciary by that fiduciary)	of a receiver, trustee, or
	Robert Wall		
		(Typed or printed name of person	signing)
	President		
	-	(Title of person signin	