Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000340502 3)))



H180003405023ABCY

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: MACFARLANE FERGUSON & MCMULLEN Account Name

Account Number : 076077001654

: (813)273-4229

Phone

Fax Number

: (813)273-4396

S TALLENT

NOV 2 5 2019

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN CITRUS RESEARCH AND FIELD TRIAL FOUNDATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	206 05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Articles of Amendment to Articles of Incorporation of

Citrus Research and Field Trial Foundation, Inc	·.				
(Name of Corporati	on as curre	ently filed with the Florida De	pt. of State)		
(Dec	unient Num	ber of Corporation (if known)			
Pursuant to the provisions of section 617.1006, F amendment(s) to its Articles of Incorporation:	lorida Statu	tes, this Florida Not For Profit	Corporation adop	its the foll	owing
A. If amending name, enter the new name of s	he corpora	tion:			
name must be distinguishable and contain the wo "Company" or "Co," may not be used in the na	rd "corpora	illan" or "incorporated" or the	abbreviation "Col	The	new πc."
B. Enter new principal office address, U applicable: (Principal office address MUST BE A STREET ADDRESS)		600 N. Broadway Avenue			
) Suite 101			_
		Bartow, Florida 33830			2019
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		600 N. Broadway Avenue			HOV 2
		Suite 101		-	− √>
		Bartow, Florida 33830		· <u>~</u>	
D. Hamending the registered agent and/or registered agent and/or the new register	istered offic red office ac	e address in Florida, onter the i	name of the		_ ! .
Come of New Residend Asens Kristen Ca		rtson			
	660 N. Broadway Avenue, Suite 101				-
Hea Regarded Gires Addiese	Bartow 33830			-	
			Fig. 33830		
New Registered Angue's Signature, If changing I hereby accept the appointment as registered again	<u> </u>	(City) <u>cents</u> That with and account the obliners	(Zip Code)		
	K K Star	ellar Cally	Of the position.		
	*****	'व रार ११ रु. द्वारादादते तेष्ट्रवसा, हु	Changing		

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>Mi</u>	on Doc ke Jones Ily Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l)Change	С	J. Mark Wheeler	206 Dal Hall Blyd.
X Add			Lake Placid, FL 33852
Remove			
2) Change	vc	Glenn Beck	640 E. Plant Street
x .Add	<u> </u>		Winter Garden, FL 34787
Remove	Т	Tom Mitchell	4889 Highway 1
3)Change			Vero Beach, FL 32961
Remove			
4) Change	Exec. D	Kristen Carlson	1501 South Florida Avenue
x Add			Lakeland, FL 33801
Remove			
5) Change	s	Tamara Wood	600 N. Broadway Avenue
x Add			Suite 101
Remove			Bartow, FL 33830
6)Change	D	Harold Browning	14885 Indrio Road
xAdd			Fort Pierce, FL 34945
Remove (H19000340502 3	3)))	Page 2 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>Mik</u>	n Doc te Jones ty Smith	
Type of Action (Check Onc)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	John C. Updike, Jr.	68 Mammoth Grove Road
x Add			Lake Wales, FL 33859
Remove			
2) Change	D	Phillip Rucks	1697 Rucks Dairy Road
x Add			Frostproof, FL 33843
Remove	D	Dr. Trevor Smith	1911 SW 34th Street
3) Change			Gainesville, FL 32608
Remove			-, · · · · · · · · · · · · · · · · ·
4)Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove		Page 2 of 4	

E. If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)	•		
,				
		· -		
				•
,			•	
				
		· · · · · · · · · · · · · · · · · · ·		. <u> </u>
				<u>. </u>

Page 3 of 4

The date of each amendment(s) adoption:	, if other than the
Rifertive date if applicable:	
(no more than 90 days after amend	ment file date)
Note: If the date inserted in this block does not meet the applicable statutory f document's effective date on the Department of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of was/were sufficient for approval.	votes cast for the amendment(s)
There are no members or members entitled to vote on the amendment(s). 'adopted by the board of directors.	The amendment(s) was/were
Daied 11/2-0/2-019 Carlson	
Signature Kriten Carlson	
(By the chairman or vice chairman of the board, presider have not been selected, by an incorporator - if in the ba other court appointed fiduciary by that fiduciary)	nt or other officer-if directors nds of a receiver, trustee, or
Kristen Carlsen	
(Typed or printed name of pe	erson signing)
Executive Director	
(Title of person si	gning)