

PO2000076534

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T CANNON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** OAKES FARMS, INC.

**DOCUMENT NUMBER:** P02000076534

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven J. Bracci, Esq.

Name of Contact Person

Steven J. Bracci, PA

Firm/ Company

9015 Strada Stell Court, Suite 102

Address

Naples, FL 34109

City/ State and Zip Code

alfie@oakesfarms.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven J. Bracci, Esq.

at ( 239 )

596-2635

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:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

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

**Street Address**

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

OAKES FARMS, INC.

P02000076534

Pursuant to the provisions of section 607.1006, Florida Statutes, this ***Florida Profit Corporation*** adopts the following amendment(s) to its Articles of Incorporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co., or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**C. Enter new mailing address, if applicable:**  
***(Mailing address MAY BE A POST OFFICE BOX)***

Name of New Registered Agent \_\_\_\_\_

(Florida street address)

*New Registered Office Address:* \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

*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:**

☒ Change      PT      John Doe

☒ Remove      V      Mike Jones

☒ Add      SV      Sally Smith

| Type of Action<br>(Check One)              | Title       | Name                        | Address                 |
|--|-------------|-----------------------------|-------------------------|
| 1) <input type="checkbox"/> Change         | <u>DPST</u> | <u>Deanne Oakes</u>         | <u>2205 Davis Blvd.</u> |
| <input type="checkbox"/> Add               |             |                             | <u>Naples, FL 34104</u> |
| <input checked="" type="checkbox"/> Remove |             |                             |                         |
| 2) <input type="checkbox"/> Change         | <u>DP</u>   | <u>Francis A. Oakes III</u> | <u>2205 Davis Blvd.</u> |
| <input checked="" type="checkbox"/> Add    |             |                             | <u>Naples, FL 34104</u> |
| <input type="checkbox"/> Remove            |             |                             |                         |
| 3) <input type="checkbox"/> Change         | <u>ST</u>   | <u>Deanne Oakes</u>         | <u>2205 Davis Blvd.</u> |
| <input checked="" type="checkbox"/> Add    |             |                             | <u>Naples, FL 34104</u> |
| <input type="checkbox"/> Remove            |             |                             |                         |
| 4) <input type="checkbox"/> Change         |             |                             |                         |
| <input type="checkbox"/> Add               |             |                             |                         |
| <input type="checkbox"/> Remove            |             |                             |                         |
| 5) <input type="checkbox"/> Change         |             |                             |                         |
| <input type="checkbox"/> Add               |             |                             |                         |
| <input type="checkbox"/> Remove            |             |                             |                         |
| 6) <input type="checkbox"/> Change         |             |                             |                         |
| <input type="checkbox"/> Add               |             |                             |                         |
| <input type="checkbox"/> Remove            |             |                             |                         |

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10/7/2014

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**Adoption of Amendment(s) (CHECK ONE)**

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

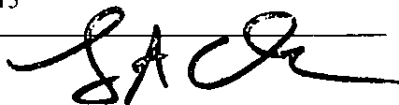
"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 6/26/2015

Signature



(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Francis A. Oakes III

\_\_\_\_\_  
(Typed or printed name of person signing)

President and Sole Director

\_\_\_\_\_  
(Title of person signing)

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**UNANIMOUS CONSENT OF SHAREHOLDERS AND DIRECTORS OF**

**OAKES FARMS, INC.**

**TO ACTION TAKEN WITHOUT SHAREHOLDERS' OR DIRECTORS' MEETING**

On this 7th day of October, 2014, we, the undersigned shareholders and directors of OAKES FARMS, INC., a Florida corporation (the "Corporation"), being all of the shareholders and directors entitled to vote with respect to the subject matter thereof, and each shareholder entitled to vote the number of shares set out opposite his or her name below, hereby agree to the following, and authorize the following action be taken without a meeting of the shareholders or directors:

1. By unanimous consent of Corporation's shareholders and director, the following individuals are hereby elected:

SOLE DIRECTOR: FRANCIS A. OAKES III

PRESIDENT: FRANCIS A. OAKES III

SECRETARY: DEANNE OAKES

TREASURER: DEANNE OAKES


The foregoing individuals shall replace the prior individuals holding said seat or office, and shall be the only Director and Officers of the Corporation.

This action by written consent may be signed in one or more counterparts, each of which shall be deemed an original, and all of which shall constitute one instrument.

This authorization shall be filed with the records of the Corporation.

In accordance with the corporation laws of the state of Florida, the undersigned, constituting the holders of 100% of the outstanding shares, and constituting all of the directors, each as indicated below, hereby adopt the foregoing Unanimous Consent effective on the date first set forth above.

**SHAREHOLDERS (100%):**

| Name                    | # of Shares                 | Signature  | Date of Execution |
|-------------------------|-----------------------------|--|-------------------|
| FRANCIS A.<br>OAKES III | 100<br>(joint with<br>Wife) |  | 10/14/2014        |

DEANNE  
OAKES

100  
(joint with  
Husband)

Deanne Oakes 10-14-14

SOLE DIRECTOR:

Name

Date of Execution

DEANNE  
OAKES

Deanne Oakes 10-14-14

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