

P03000144777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

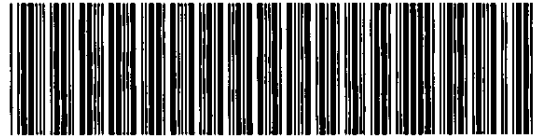
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
13 NOV 19 AM 10:08

NOV 26 2013  
T. CARTER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 23, 2013

GUY D PONTI  
FLA-GA ADVERTISING COOPERATIVE, INC.  
5040 W. THARPE ST., SUITE 306  
TALLAHASSEE, FL 32303 US

SUBJECT: FLA-GA ADVERTISING COOPERATIVE, INC.  
Ref. Number: P03000144777

We have received your document for FLA-GA ADVERTISING COOPERATIVE, 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):

The new registered agent must sign accepting the designation of Registered Agent on page 1 of the Amendment.

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 D Carter  
Regulatory Specialist

Letter Number: 313A00024703



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 13, 2013

BRYAN K SMITH  
FLA-GA ADVERTISING COOPERATIVE, INC.  
3783 HARTSFIELD RD  
TALLAHASSEE, FL 32303 US

*2nd mailing*

SUBJECT: FLA-GA ADVERTISING COOPERATIVE, INC.  
Ref. Number: P03000144777

We have received your document for FLA-GA ADVERTISING COOPERATIVE, 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):

The registered agent must sign accepting the designation.

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 D Carter  
Regulatory Specialist

Letter Number: 413A00026266

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: FLA-GA ADVERTISING COOPERATIVE, INC  
DOCUMENT NUMBER: P03000144777

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

Please return all correspondence concerning this matter to the following:

GUY D PONTI

Name of Contact Person

FLA-GA ADVERTISING COOPERATIVE, INC

Firm/ Company

5040 W THARPE ST, STE 306

Address

TALLAHASSEE FL 32303

City/ State and Zip Code

RibBBQ@Comcast.Net

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

For further information concerning this matter, please call:

GUY D PONTI at (850) 765-1054  
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:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>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

Articles of Amendment  
to  
Articles of Incorporation  
of

13 NOV 19 AM 10:08

FLA-GA ADVERTISING COOPERATIVE, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

PO3000144777

(Document Number of Corporation (if known))

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

**A. If amending name, enter the new name of the corporation:**

*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."*

**B. Enter new principal office address, if applicable:**  
(Principal office address **MUST BE A STREET ADDRESS**)

FLA-GA ADV. COOP.  
5040 W. Tharpe St., Ste 306  
Tallahassee, FL 32303

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

FLA-GA ADV COOP  
5040 W. Tharpe St., Ste 306  
Tallahassee, FL 32303

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent Harold A Smith  
5040 W. Tharpe St., Suite 306  
(Florida street address)

New Registered Office Address: Tallahassee, Florida 32303  
(City) (Zip Code)

**\* New Registered Agent's Signature, If changing Registered Agent:**

*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:

X Change                      PT      John Doe

X Remove                      V      Mike Jones

X Add                              SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>PD</u>	<u>BRYAN K SMITH</u>	<u>5040 W Tharpe St, Box 7</u> <u>TALLAHASSEE FL 32303</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>PD</u>	<u>HAROLD A SMITH</u>	<u>5040 W Tharpe St, Ste 306</u> <u>TALLAHASSEE FL 32303</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>                    </u>	<u>                    </u>	<u>                    </u> <u>                    </u> <u>                    </u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>                    </u>	<u>                    </u>	<u>                    </u> <u>                    </u> <u>                    </u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>                    </u>	<u>                    </u>	<u>                    </u> <u>                    </u> <u>                    </u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u>                    </u>	<u>                    </u>	<u>                    </u> <u>                    </u> <u>                    </u>

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

[illegible]

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

[illegible]

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

Effective date if applicable: 10/1/2013  
(no more than 90 days after amendment file date)

**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 10/9/13

Signature [Handwritten 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)

HAROLD A SMITH

(Typed or printed name of person signing)

PD

(Title of person signing)