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(City/State/Zip/Phone #)

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(Business Entity Name)

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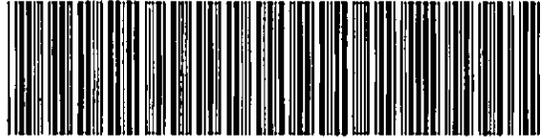
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 1, 2020

THOMAS V. CUNILIO
285 N.W. BERT AVE
LAKE CITY, FL 32055 US

SUBJECT: CENTER OF SUSTAINABLE AGROFORESTRY, INC.
Ref. Number: W20000135819

We have received your document for CENTER OF SUSTAINABLE AGROFORESTRY, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form.

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) 245-6052.

Jalesa S Dennis
Regulatory Specialist II

Letter Number: 220A00023901

SEE ATTACHED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: CENTER OF SUSTAINABLE SILVOPASTORALISM, Inc.

ARTICLE II PRINCIPAL OFFICE

285 - NW BEET AVE
Principal street address
LAKE CITY, FL 32055

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO DEVELOP THROUGH R+D
PROMISING FORAGE, ENERGY AND GROUND COVER CROPS
FOR FL AND THE LOWER SOUTH AND TO SELL SUCH
MATERIAL FOR PROFIT.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: THOMAS V. CUNIZIO
Address: 285 N.W. BEET AVE
LAKE CITY, FL 32055
PRESIDENT

Name and Title: JOHN RANGREN
Address: 285 N.W. BEET AVE
LAKE CITY, FL 32055
VICE PRESIDENT

Name and Title: DENNIS FISHER
Address: 285 N.W. BEET AVE
LAKE CITY FL 32055
CEO

Name and Title: MARIO BASARA
Address: 830 LOBER RD
IRWIN PA 15642
GFO 724-289
- 0154

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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STATE OF FLORIDA

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: THOMAS V. CUNILIO
Address: 285 N.W. BERT AVE
LAKE CITY, FL 32055

ARTICLE VII INCORPORATOR

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

Name: THOMAS V. CUNILIO
Address: 285 N.W. BERT AVE
LAKE CITY, FL 32055

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____, (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 days after the filing.)

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.

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

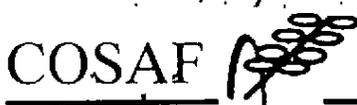
TLV.C.
Required Signature/Registered Agent

NOV. 12, 2020
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

TLV.C.
Required Signature/Incorporator

NOV. 12, 2020
Date



COSAF
CENTER OF SUSTAINABILITY AGROFORESTRY, INC.

P.O. BOX 358814, GAINESVILLE, FLORIDA 32653

(352) 376-6265
GAINESVILLE

November 12, 2020

To: New Filing Section, FL Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

I am the principle of the Center of Sustainable Agroforestry, Inc. I have been in touch this week with Ms. Melanie Sellers in the Director's Office of the Ombudsman who helped me straighten a situation out.

The Center of Sustainable Agroforestry was filed as a not-for-profit at one point and we never operated as such. IRS 501(c)(3) designation was not obtained. I wish to release the application and I do not wish to reinstate the original filing. I do wish to maintain the same name for the new, for-profit-corporation. We have been paying the RT-6 tax right along as well as the Federal Taxes for at least 2 years. Our State Account # is 3563663.

Attached is the form to establish a For-Profit Corporation along with a check (# 1246) for \$70 from the Regions Bank.

Thank you.

Thomas V. Cunilio
285 Bert Ave.
Lake City, FL

Officer, Registered Agent and Incorporator of the Center of Sustainable Agroforestry, Inc.

*The first Center of Sustainable Agroforestry was indeed a 501(c)(3) and was created in 1989 by myself in Gainesville, FL. I converted it into the North Central Florida RC&D Council around 2004. I left that entity around 2012; that Council remains in existence even though it lost its IRS status.

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