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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 27 PM 2:29

Amend

AUG 30 2012

T. BROWN

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: **GAVCARR FOUNDATION, INC**

DOCUMENT NUMBER: **N03000001186**

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

Please return all correspondence concerning this matter to the following:

Seana Westcarr-Gray

(Name of Contact Person)

(Firm/ Company)

1245 Four Leaf Lane

(Address)

Hollidaysburg, PA 16648

(City/ State and Zip Code)

seana12b@yahoo.com

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

For further information concerning this matter, please call:

Seana Westcarr-Gray

(Name of Contact Person)

at **434** **326-0885**

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

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

Articles of Amendment
to
Articles of Incorporation
of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 27 PM 2:29

Gavcarr Foundation Incorporated

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

N03000001186

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For 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" or "incorporated" or the abbreviation "Corp." or "Inc."
"Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--------------------------------------|--------------|-------------|----------------|
| 1) <input type="checkbox"/> Change | _____ | <u>n/a</u> | _____ |
| <input type="checkbox"/> Add | _____ | _____ | _____ |
| <input type="checkbox"/> Remove | _____ | _____ | _____ |
| 2) <input type="checkbox"/> Change | _____ | _____ | _____ |
| <input type="checkbox"/> Add | _____ | _____ | _____ |
| <input type="checkbox"/> Remove | _____ | _____ | _____ |
| 3) <input type="checkbox"/> Change | _____ | _____ | _____ |
| <input type="checkbox"/> Add | _____ | _____ | _____ |
| <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 | _____ | _____ | _____ |

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

Former Phone Number For Gavcarr Foundation: 434-227-7355
New Phone Number For Gavcarr Foundation: 814-215-6439

Incorporated

Incorporated

Amendment to Articles of Incorporation's Purpose

1. To promote a better quality of life for Jamaican children 0-18 years old who are infected with or affected by HIV/AIDS through social, educational, financial and nutritional means.
2. To foster programmers to assist in the proper medical treatment of children affected with HIV/AIDS.

POWERS

The Foundation shall have the following powers which shall be exercised solely in the furtherance of the purpose of the Foundation, namely:

1. To provide infected and affected persons with clothing, food, school supplies, medication, toys and books.
2. To establish homes to house and school these children affected or infected with HIV/AIDS.
3. To provide programs and the necessary support for the emotional development of these children.
4. To plan, management and stage fund-raising activities and to use the proceeds therefrom in the furtherance of it's purpose.
5. To provide, endow, furnish, maintain, fit out with all necessary furniture and other equipment, and manage such buildings and other premises as may be required for the purpose of the Foundation.
6. To draw, make, accept, endorse, discount, execute or issue all instruments both negotiable and transferable and non-transferable including promissory notes, bills of exchange, bills of lading, warrants and debentures and bonds, during the course of business of the Foundation in the promotion of its purpose.
7. To employ and remunerate in such manner as may be thought expedient officers, secretaries,

GAVCARR FOUNDATION INCORPORATED
N03000001186

Amendment to Articles of Incorporation (Contin)

Attorney-at-law, accountants, clerks, lecturers, tutors, and other persons whom the Foundation may consider necessary for expediency to employ for the purposes of the Foundation in the promotion of any of its purposes.

8. To do all such lawful things as are incidental or conducive to the attainment of the above purposes and powers, or any one or more of them.

Provided that the income of the Foundation shall be used solely in promoting the purpose of the Foundation, and no portion thereof shall be paid or transferred directly or indirectly by way of dividend or bonus or otherwise to benefit any private individual member of the organization.

Provided that nothing shall prevent the payment in good faith of reasonable and proper remuneration to any officer or servant of the Foundation, or to any member of the Foundation in return for any services actually rendered to the Foundation, nor prevent the payment of interest at a rate not exceeding six percent per annum on money lent, or reasonable and proper for rent for premises demised or let by any member to the Foundation for its sole operation. But so that no member of the council of management, governing body of the company nor its directors shall be appointed to any salaried office of the company or any office of the company paid by fees, and that no remuneration or other benefit in money or money's worth shall be given by the company to any member of council or governing body except repayment of out-of-pocket expenses and interest at the rate aforesaid on money lent or reasonable, and for proper rent for premises demised or let to the Foundation for its sole operation.

The date of each amendment(s) adoption: 8/23/12

Effective date if applicable: 8/23/12
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 8/23/12

Signature Seana Westcarr-Gray
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Seana Westcarr-Gray
(Typed or printed name of person signing)

D/CEO
(Title of person signing)