

N17000005359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



900299628359

07/10/17--01040--004 \*\*17.50

05/30/17--01039--022 \*\*35.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 JUL -3 PM12:09

*Amund*

JUL 07 2017  
D CUSHING



5/27/17

**Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**

RE: Amending Articles of Incorporation- Adding two articles  
Document #: N17000005359

To whom it may concern,

I want to add two articles to my Articles of Incorporation for my nonprofit business. Attached are the current articles including my Mission Statement and Dissolution Clause. A \$35.00 check for the amendment fee is also included.

Thank you and please advise me if there is anything you need.

Sincerely,

Jessica Bachansingh  
Executive Director  
Gifts for Confidence  
5534 Horse Stable Lane  
Jacksonville, FL 32258  
904-382-1563  
jessicabachansingh@gmail.com

**Attachments:**

Electronic Articles of Incorporation (Articles I – VIII)  
Certified Copy – Articles of Incorporation  
Certificate of Status – Gifts for Confidence Inc. - Corporation  
New: Article IX - Dissolution Clause  
New: Article X - Mission Statement

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
17 JUL -3 PM12:09



June 30, 2017

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

RE: Letter #717A00011438  
Articles of Amendment to Articles of Incorporation – Gifts for Confidence (Enclosed)  
Check: June 30, 2017 Check #0100 \$17.50 (Enclosed)

To Whom it May Concern:

Per the Florida Department of State, Division of Corporations letter dated, June 7, 2017 (#717A00011438), I am enclosing the completed and signed Articles of Amendment to my Articles of Incorporation for Gifts for Confidence.

You are in receipt of my \$35 Check and I am now enclosing another check for \$17.50 (\$8.95 for a Certified Copy and \$8.95 for a Certificate of Status).

Please confirm receipt of these documents and check and let me know if there is anything else I need to do to complete the Amendment for Articles IX and X as outlined in the attachments.

Sincerely,

Jessica Bachansingh, Registered Agent  
JessicaBachansingh@gmail.com  
904.382.1563

RECEIVED  
17 JUL -3 PM 3:27  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Gifts for Confidence

DOCUMENT NUMBER: NI7000005359

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

Please return all correspondence concerning this matter to the following:

Jessica ANN Bachansingh  
(Name of Contact Person)

Gifts for Confidence Inc.  
(Firm/ Company)

5534 HORSE Stable Lane  
(Address)

Jacksonville, FL 32258  
(City/ State and Zip Code)

JessicaBachansingh@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joanne Kazmierski at 727-644-1180  
(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 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 is<br>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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 7, 2017

JESSICA BACHANSINGH  
GIFTS FOR CONFIDENCE  
5534 HORSE STABLE LANE  
JACKSONVILLE, FL 32258

SUBJECT: GIFTS FOR CONFIDENCE INC.  
Ref. Number: N17000005359

We have received your document for GIFTS FOR CONFIDENCE 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):

You need to file articles of amendment to add the 2 articles. Please see the attached 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) 245-6050.

Diane Cushing  
Senior Section Administrator

Letter Number: 717A00011438

Articles of Amendment  
to  
Articles of Incorporation  
of

Gifts for Confidence Inc.

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

N17000005359

(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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
JUL - 3 PM 12:09

**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	_____	_____	_____
<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)

Article ix Dissolution Clause (see Attached)  
Article x Mission Statement (see Attached)



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

May 26, 2017

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 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

6-30-2017

Signature

Jessica Bachansingh  
(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)

Jessica Ann Bachansingh

(Typed or printed name of person signing)

Registered Agent

(Title of person signing)

### **Article IX: Dissolution Clause**

Upon the dissolution of Gifts for Confidence Inc., assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future Federal tax code. Any assets not so disposed shall be disposed of by a court of competent jurisdiction of the county in which the principal office of the corporation is located. Disposal shall be made exclusively for exempt or public purposes, or be made to such organization or organizations as the court shall determine to be organized exclusively for such purposes

**Gifts for Confidence**

**Document #: N17000005359**

Jessica Bachansingh  
Executive Director  
Gifts for Confidence  
5534 Horse Stable Lane  
Jacksonville, FL 32258  
904-382-1563  
jessicabachansingh@gmail.com

## **Article X: Mission Statement**

To empower girls globally by teaching them a marketable skill

### **Gifts for Confidence**

**Document #: N17000005359**

Jessica Bachansingh

Executive Director

Gifts for Confidence

5534 Horse Stable Lane

Jacksonville, FL 32258

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