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(Requestor's Name)

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(City/State/Zip/Phone #)

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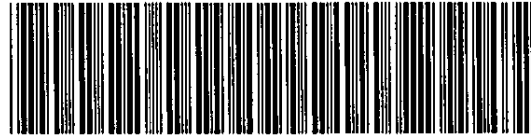
(Business Entity Name)

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## COVER LETTER

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

**SUBJECT:** Rise and Bless, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee &  
Certificate of  
Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☐ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

**FROM:** Dr. Assana Gampine  
\_\_\_\_\_  
Name (Printed or typed)

322 Burnt Pine Drive  
\_\_\_\_\_  
Address

Naples, FL 34119  
\_\_\_\_\_  
City, State & Zip

(201) 887-2525  
\_\_\_\_\_  
Daytime Telephone number

agampine@aol.com

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

**NOTE: Please provide the original and one copy of the articles.**

**ARTICLES OF INCORPORATION**  
In compliance with Chapter 617, F.S., (Not for Profit)

**ARTICLE I NAME**

The name of the corporation shall be: Rise and Bless, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address:  
322 Burnt Pine Drive, Naples, FL 34119

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Said corporation is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

**ARTICLE IV MANNER OF ELECTION** The manner in which the directors are elected and appointed: \_\_\_\_\_

The first Board of Directors shall consist of those persons named in the Articles of Incorporation. Such persons shall hold office until the first annual election of Directors.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Dr. Assana Gampine, President

Address: 322 Burnt Pine Drive  
Naples, FL 34119

Name and Title: Cynthia Davis, Vice President

Address: Lakebend Preserve Court  
Bonita Springs, FL 34135

Name and Title: Sue Ryan, Executive Secretary

Address: 7112 Lemuria Circle, Unit 304  
Naples, FL 34109

Name and Title: Antoinette Duah, Treasurer

Address: 23 Blue Ridge Circle  
Scotch Plains, New Jersey 07076

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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: Dr. Assana Gampine  
Address: 322 Burnt Pine Drive  
Naples, FL 34119

**ARTICLE VII INCORPORATOR**

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

Name: Dr. Assana Gampine  
Address: 322 Burnt Pine Drive  
Naples, FL 34119

**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*

Gampine Assana  
Required Signature of Registered Agent

6-5-2017  
Date

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

Gampine Assana  
Required Signature of Incorporator

6-5-2017  
Date

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FILED

## **ARTICLE IX. DISTRIBUTION OF ASSETS UPON DISSOLUTION**

Upon the dissolution of the nonprofit corporation, its 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, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the nonprofit corporation is then located, exclusively for such purposes, or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

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