## N23000014401

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/Cital Lip/ Notice ity
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
·

Office Use Only



300428664073

05/01/24~-01019~~006 \*\*35.00

2024 KAY -1 AH 9: 27

DocuSign Envelope ID. 2B630F09-B523-4DF8-9587-94A13DD6FB68



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Not for Profit Corporation pursuant to section 617,1006, Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- If amending/adding officers/directors, list titles and addresses for each officer/director,

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

The document must be typed or printed and must be legible.

Pursuant to section 617,0123. Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

**Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

DocuSign Envelope ID: 2B630F09-B523-4DF8-9587-94A13DD6FB68

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

BritGiving Inc.

NAME OF CORPORATION:			
N23000014401			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing.		
Please return all correspondence concerning this material Ross D. Kulberg	er to the following:		
	(Name of Contact Per	son)	
KRINZMAN HUSS LUBESTKY FELDMAN & HO	TTE		
	(Firm/ Company)		
169 E. Flagler Street Suite 500			
	(Address)		
Miami, FL 33131			
-	(City/ State and Zip Co	ode)	
RDK@KHŁLAW.COM			
E-mail address: (to be use	l for future annual repo	rt notification	1)
For further information concerning this matter, please	· call;		
Ross D. Kulberg		305	854-9700
· ·	at		
(Name of Contact Persor	1.	Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida De	epartment of	State:
⊠ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327

Street Address
Amendment See

Amendment Section
Division of Corporations
The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of

2024 MAY	17 En
120	/ Airj o
	<u>~~~</u> ?>

BritGiving Inc.

(Name of Corporation as currently filed with the Florida I N23000014401	Dept. of State)
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. <u>If amending name</u> , enter the new name of the corporat ReGifted Inc.	ion:
name must be distinguishable and contain the word "corporate	The new ion" 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:	C/O KRINZMAN HUSS LUBETSKY FELDMAN & HOTTE
(Principal office address MUST BE A STREET ADDRESS	169 E. Flagler Street Ste. 500
	Miami, FL 33131
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	C/O KRINZMAN HUSS LUBETSKY FELDMAN & HOTTE
	169 E. Flagler Street Ste. 500
	Miami, FL 33131
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	ee address in Florida, enter the name of the ddress:
Name of New Registered Agent	
New Registered Office Address:	(Florida street address)
	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: nillar with and accept the obligations of the position.
Sh	gnature 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 X Remove X Add	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add			
Remove			
2) Change Add		_	
Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. <u>If amending or addin</u> (attach additional shee	g additio	onal Articles, enter change(s) here: essary) (Be specific)	

uSign Envelope ID: 2B630F09-B523-4DF8-9587-94A13DD6FB68		
· · · · · · · · · · · · · · · · · · ·	···	
		· · ·
		<del></del>
	· · ·	
. 18-310		
	· · · · · · · · · · · · · · · · · · ·	
<del>.</del>		<del></del>
The date of each amendment(s) adoption:date this document was signed.		, if other than
Effective date <u>if applicable:</u> (no more than 90 days after amendment)		

<u>Note:</u> 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)

ign En	velope ID: 2B630F09-B523-4DF8-9587-94A13DD6FB68
	here are no members or members entitled to vote on the amendment(s). The amendment(s) was/were dopted by the board of directors.
	4/12/2024 Dated
	DocuSigned by:
	Signature dimber featock (1398the utwirman 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)
	Amber L. Peacock
	(Typed or printed name of person signing)
	President
	President (Title of person signing)