N190000 12789

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: $_$	Basket Of Blessings, 	Inc.		
	00012789			
DOCUMENT NUMBER:		<u>-</u> _		 _
The enclosed Articles of Amendm	ent and fee are subr	mitted for filing.		
Please return all correspondence o	oncerning this matte	er to the following:		
Peter Hagood				
		(Name of Contact Perso	on)	-
Hagood Law Group				
		(Firm/ Company)		
451 Maitland Avenue				
		(Address)		-
Altamonte Springs, Florida				
<u>.</u> , . <u></u>		(City/ State and Zip Coo	de)	
phagood@hagoodlawgroup.com				
E-mail	address: (to be used	for future annual report	t notification)
For further information concerning	g this matter, please	call:		
Peter Hagood		32 at	21-285-1900	
(Nam	e of Contact Person		rca Code)	(Daytime Telephone Number)
Enclosed is a check for the follow	ng amount made pa	ayable to the Florida Dep	partment of S	State:
	3.75 Filing Fee & ertificate 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

Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Basket Of Blessings, Inc.			
Name of Corporation as currently filed with the Florida	Dept. of State)		
N19000012789			
(Document Nun	nber of Corporation	(if known)	
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	utes, this <i>Florida No</i>	t For Profit Corporation adopts the	following
a. If amending name, enter the new name of the corpor	ation:		
			_The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name.	ration" or "incorpoi	ated" or the abbreviation "Corp." (or "Inc."
3. Enter new principal office address, if applicable:		<u></u>	20:
Principal office address <u>MUST BE A STREET ADDRES</u>	<u>S</u>)	ACE	` 02
			- ⋛-
		<u> </u>	<u> </u>
Entar now mailing address if anniously		\$5°	~·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		SER	P
		**************************************	<u>.</u>
	-		. 1
		• •	
If amending the registered agent and/or registered of new registered agent and/or the new registered office		ida, enter the name of the	
new registered agent and/of the new registered office	addiess.		
Name of New Registered Agent:			
New Registered Office Address:		(Florida street address)	
		Florida	
	(City)	(Zip: Code)	
New Registered Agent's Signature, if changing Registere thereby accept the appointment as registered agent. I am j		cept the obligations of the position.	
	Signature of New Re	egistered 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	<u>V</u> <u>Mik</u>	n Doe e Jones v Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add				
Remove				
2) Change Add				
Remove 3) Remove Add Remove			2020 L	
4) Change Add			AFRICO F	_
Remove 5) Change Add			PH 12: 54	ָ כ
Remove 6) Change Add				
E. If amending or addi (attach additional she	ng additional A ets, if necessary	Articles, enter change(s) here: (Be specific)		
Article IX	·			
Upon the dissolution of t	the organization	n, assets shall be distributed for one or more exe	empt purposes within the meaning of	
Section 501(c)(3) of the	Internal Revenu	ue Code, or corresponding section of any future	federal tax code, or shall be	
distributed to teh federal	government, or	r to a state or local government, for a pubic purp	pose. Any such assets not disposed	
of shall be dinosed by a	court of compet	tent jurisdiction in the county in which the prince	sign office of the organization is	

then located, exclusively for such p	urposes or to such organization or organizations, as s	said court shall determine, which
are organized and operated exclusiv	rely for such purposes.	
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		SSC TO IT
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The date of each amendment(s) a date this document was signed.	loption:	, if other than the
Effective date <u>if applicable</u> : 5/27	/2020	
	(no more than 90 days after amendment file d	late)
Note: If the date inserted in this bloodocument's effective date on the Do	ick does not meet the applicable statutory filing requipartment of State's records.	direments, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a was/were sufficient for approv	dopted by the members and the number of votes cast	for the amendment(s)

Dated	7/2/2020
pared	
Signature	
	(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) Peter Hagood
	(Typed or printed name of person signing)
	President
	(Title of person signing)

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

adopted by the board of directors.

20 JUL -6 PM 12: