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(Re	equestor's Name)	
(Ad	idress)	
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PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nam	191
(50	isiness Linkly Hall	ie)
(1)0	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

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

SUBJECT: Basically V	Vonderful, Inc.			
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed is an original a	nd one (1) copy of the Artic	les of Incorporation and	a check for:	
_				
□ \$70.00	□ \$78.75	□\$78.75	☑ \$87.50	
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,	
	Certificate of Status	& Certified Copy	Certified Copy & Certificate	
		ADDITIONAL COPY REQUIRED		
FROM:	Isabella Giannosa		_	
	Name (Printed or typed)			
	160 Riverbridge Circle, Apt.6-208C			
	Address			
	Oviedo, Florida, 32765			

386-365-9633

beck@basicallywonderful.online

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

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

City, State & Zip

Daytime Telephone number

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of the	<u>NAME</u> corporation shall be: Basically Wond	erful, Inc.	,,		
	PRINCIPAL OFFICE				
	Principal street address:		Mailing address, if different is:		
160	Riverbridge Circle	P.O.	P.O. Box 621754		
Ovie	do, Florida, 32765	Ovie	Oviedo, Florida, 32762		_
exclusively f	PURPOSE which the corporation is organized is: for charitable purposes under Sec				
	nding section of any future federa				
	that creates accessible peer-led	spaces and acc	cess to resources that are welco	ming to	
Queer Trans	s and Disabled communities.				
				2000	
ARTICLE IV As stated in	MANNER OF ELECTION The manner the bylaws.	ner in which the direc	ctors are elected and appointed:	73 PH 2	
	Loren Lachner, President		Tony DePalma, Vice President	1:17	أر
	180 Brennan Street, Apt. 219		1023 Preston Court	-	
Address	San Francisco, California, 94107	Address:	Tallahassee, Florida, 32304	-	
Nome and Title	Grey Scuffy Wise, Secretary	— Name and Title:	Madeline Crowley, Treasurer	-	
	828 Mulberry Bush Court	Address:	250 N. Columbus Boulevard, Apt. 302	-	
Address _	Orlando, Florida, 32828		Philadelphia, Pennsylvania, 19106	-	
Name and Title:		Name and Title:		-	
Address		Address:		_	

Name and Title:		Name and Title:_				
Address		Address:				
		_				
Name and Title:		Name and Title;_	<u> </u>			
Address		Address: _				
		_				
ARTICLE VI R	REGISTERED AGENT	11.5 - 6.1	and an out to			
The name and Flo	rida street address (P.O. Box NOT accept	able) of the regist	ered agent is:		•	
Name:	Isabella Giannosa					
Address:	160 Riverbridge Circle, Apt. 6-2	08C				
	Oviedo, Florida, 32765				· · · ·	s
					9:3	;
	NCORPORATOR					
the <u>name and add</u>	Iress of the Incorporator is:				123	- 2000 - 2000
Name:	Isabella Giannosa				•	
Address:	160 Riverbridge Circle, Apt. 6-2	08C			PH 4:	ر ال ه
	Oviedo, Florida, 32765			*:	1:17	فمسط
ARTICLE VIII	EFFECTIVE DATE:		2.000		•	
Effective date, if o	ther than the date of filing:	l cannot be more	(OPTIONAL) e than five days prio	or or 90 days after	the filin	g.)
Note: If the date i	inserted in this block does not meet the applice date on the Department of State's recor	olicable statutory				
Having been nam certificate, I am fa	ed as registered agent to accept service of miliar with and accept the appointment as	f process for the registered agent o	above stated corporo and agree to act in thi	ation at the place is capacity	designate	ed in this
Isabella Giauuosa			2023-08-09			
-	Required Signature of Registered A	Agent		Date		
I submit this docur the Department of	nent and affirm that the facts stated herein State constitutes a third degree felony as p	are true. I am ax rovided for in s.8	vare that any false inf 17.155, F.S.	ormation submitte	d in a doc	ument to
	Isabella Giauuosa			2023-08-09		
	Required Signature of Incorp	orator		Date		