N23000011956

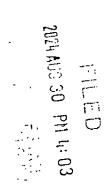
(Re	equestor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer.	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BAS	IC NEEDS MIAMI, INC.
DOCUMENT NUMBER: N 23000	0011956
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
<i></i>	ROBIN OXFORD-DAYIS (Name of Contact Person)
	(Name of Contact Person)
BAS	(Firm/ Company)
	(Firm/ Company)
2	1401 SW 122nd AVE
	(Address)
	MIAMI, FL. 33177
	(City/ State and Zip Code)
	e used for future annual report nonflication)
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	blease call:
ROBIN OXFOR	erson) at 786 - 930 - 630 9 (Area Code) (Daytime Telephone Number)
(Name of Contact P	erson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
☐ \$35 Filing Fee ☑\$43.75 Filing Fe Certificate of Sta	Certified Copy (Additional copy is enclosed) Catus Certified Copy (Additional copy is Enclosed) Certified Copy (Additional Copy is Enclosed)
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

Articles of Amendment Articles of Incorporation

Art	ucies of Amendment	
A42.	to	
Artic	cles of Incorporation of	2-
D 40.	THE ALLMANT TALE	2024 AUG
	DS MIAMI, INC.	
ne of Corporation as currently filed with the Florid	ia Dept. of State)	1 :
	0011956	
(Document Nu	mber of Corporation (if known)	
rsuant to the provisions of section 617,1006, Florida Sta endment(s) to its Articles of Incorporation:	nutes, this Florida Not For Profit Corporation adopts the	: following
If amending name, enter the new name of the corpo	ration:	
N /A		Therese
me must be distinguishable and contain the word "corne	oration" or "incorporated" or the abbreviation "Corp."	_The new or "Inc."
ompany" or "Co." may not be used in the name.	The medipolitical with the management of	
	N/A	
Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRE	(22)	
ncipal office address MOST DE A STREET ADDRES		
		_
Enter new mailing address, if applicable:	-1/-	
(Mailing address MAY BE A POST OFFICE BOX)	N/A	
		_
f 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	ce address:	
	N/A	
Name of New Registered Agent:		
Many Danietowal (After Address	(Florida street address)	
New Registered Office Address:		
	(City) , Florida (Zip Code)	
	(City) (Zip Code)	
w Registered Agent's Signature, if changing Register	red Agent:	
reby accept the appointment as registered agent. I an	n familiar with and accept the obligations of the position.	
	,	
	N/A	
-	Signature of New Registered Agent, if changing	

and address of each Offic (Attach additional sheets, Please note the officer/dir P = Provident: V = Vice P	icer and/or Direct if necessary) rector title by the j resident; T = Trect Chief Financial	first letter of the office title: usurer; S= Secretary; D= Director; TR= Trust Officer. If an officer/director holds more than	ee; C = Chairman or Clerk; CEO = Chief
Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	ves the corporation	nanner. Currently John Doe is listed as the PS on, Sally Smith is named the V and S. These sho SV as an Add.	T and Mike Jones is listed as the V. There is muld be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change Add		N/A	
Remove 2)ChangeAdd		N/A	
Remove 3) Remove Add Remove		N/A	
4) Change Add		<u> </u>	
Remove 5) Change Add		N/A	
Remove 6) Change Add		N/A	
E. If amending or additional shed		ticles, enter change(s) here: (Be specific)	
Basic 1	Veeds 1	Miami, Inc is organ	nized exclusively
		e, religious, educo urposes, including,	
the ma	king of	distributions to c	organizations
that que	alify a	s exempt organiza	tions described

under Section 501(c)(3) of the Internal
Revenue Code or corresponding section
of any future federal tax code,
Upon dissolution of the organization, assets
Shall be distributed for one or more exempt
purposes within the meaning of Section
501(c)(3) of the Internal Revenue Code, or
shall be distributed to the federal
government or to a state or local government,
for a public purpose.
The date of each amendment(s) adoption:, if other than the
date this document was signed.
Effective date if applicable: June 25, 2024 (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.

adopted by the board of directors.
Dated August 20, 2024
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 (iduciary)
Robin Oxford-Davis
(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

COVER LETTER

TO: Amendment Section Division of Corporations

. .

NAME OF CORPORATION: BASIC NE	EEDS MIAMI, INC.
DOCUMENT NUMBER: N 230000119	
The enclosed Articles of Amendment and fee are submitted for	filing.
Please return all correspondence concerning this matter to the f	following:
ROBIN (Name o	OXFORD-DAYIS f Contact Person)
BASIC NE	EDS MIAMI, INC.
(Fin	EDS MIAMI, INC.
21401 5	SW 122nd AVE (Address)
	(Address)
MIAI	MI, FL. 33177
	ate and Zip Code)
r da v is	54848@gmail.com
For further information concerning this matter, please call:	te aimidal tepore nottication)
ROBIN OXFORD-DAV	15 at 786 - 930 - 630 9 (Area Code) (Daytime Telephone Number)
(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:
☐ \$35 Filing Fee ☑\$43.75 Filing Fee & ☐\$43.7 Certificate of Status Certificate of Status (Addienclo	led Copy Certificate of Status tional copy is Certified Copy
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

Article	es of Incorpora	ation	~1,
	of		2026 ED
BASIC NEEL			2024 AUG 30 FA 4: 0
Name of Corporation as currently filed with the Florida	Dept. of State)	14.0
N23000	01195	6	<u> </u>
(Document Num	ber of Corporat	ion (if known)	
Pursuant to the provisions of section 617.1006, Florida Statumendment(s) to its Articles of Incorporation:	tes, this <i>Floride</i>	a Not For Profit Corp	
A. If amending name, enter the new name of the corpora	ition:		
NA			The new
name must be distinguishable and contain the word "corpor	ation" or "inco	orporated" or the abb	reviation "Corp." or "Inc."
"Company" or "Co," may not be used in the name.		•	
B. Enter new principal office address, if applicable:		N/A	
Principal office address MUST BE A STREET ADDRESS	<u>S</u>)		
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
(Maning address MIII DE NI GOX OI LICE BOT)	· · · · · · · · · · · · · · · · · · ·		
		. <u>.</u>	
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		Florida, enter the na	ame of the
new registered agent and/or the new registered diffee	addi Çəş,	.1/4	
Name of New Registered Agent:		N/A	
		(Florida street add	ress)
New Registered Office Address:			
			, Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registere	d Agent:		
hereby accept the appointment as registered agent. I am f		d accept the obligation	ons of the position.
		,	
		N/A	
	Signature of Ne	w Registered Agent,	f changing

and address of each Off (Attach additional sheets, Please note the officer/di P = President; V = Vice I	icer and/or Dire , if necessary) rector title by the President; T= Tre = Chief Financial	first letter of the office title: asurer; S= Secretary; D= Director; TR= Trus Officer. If an officer/director holds more than	tee; C = Chairman or Clerk; CEO = Chief
Changes should be noted a change, Mike Jones lea Mike Jones, V as Remove	ives the corporati	manner. Currently John Doe is listed as the PS on, Sally Smith is named the V and S. These sh , SV as an Add.	ST and Mike Jones is listed as the V. There is ould be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	PT John E V Mike J SV Sally S	lones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add		N/A	
Remove 2) Change Add		<u>N/A</u>	
Remove 3) Remove Add Remove		N/A	
4) Change Add		N/A	
Remove 5) Change Add		N/A	
Remove 6) Change Add		N/A	
Remove E. If amending or addi (attach additional she		ticles, enter change(s) here: (Be specific)	
Basic 1	Veeds 1	Miami, Inc is orga	nized exclusively
for chi	<u>aritabl</u>	e, religious, educa	ational and
Scient	ific pu	irposes, including,	for such purposes,
the ma	king of	irposes, including, distributions to c	organizations,
that qui	alify a	s exempt organiza	utions described

under Section 501(c)(3) of the Internal
Revenue Code or corresponding gection
of any future federal tax code,
Upon dissolution of the organization, assets Shall be distributed for one or more exempt purposes within the meaning of Section 501(c)(3) of the Internal Revenue Code, or shall be distributed to the federal government or to a state or local government, for a public purpose.
The date of each amendment(s) adoption:
Effective date if applicable: June 25, 2024
(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.

Ø	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 August 20, 2024
	Signature
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Robin Oxford-Davis
	(Typed or printed name of person signing)
	President (Title of person signing)