P23000054370

| (Requestor's Name) | |
|---|----------|
| | |
| (Address) | |
| (Addiess) | |
| | |
| (Address) | _ |
| | |
| (City/State/Zip/Phone #) | <u></u> |
| (0.1), 0.10.10.2.3 | |
| PICK-UP WAIT | MAIL |
| | |
| (Business Entity Name) | |
| (Busiless Entity Marile) | |
| | |
| (Document Number) | |
| | |
| Certified Copies Certificates of Status | <u>i</u> |
| | |
| | |
| Special Instructions to Filing Officer: | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

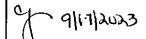


100414503611

08/28/23--01037--025 **95.00

2023 *L*TS 28 - LTH: 57

Office Use Only



COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: BACK 2 BASICS | , INC. | |
|--------------------------|---|---|--|
| DOCUMENT NUMI | P23000054370 | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | spondence concerning this ma | tter to the following: | |
| | Michelle Chislom | | |
| | | Name of Contact Person | 1 |
| | _ | Firm/ Company | |
| | 4061 SW 47TH COURT | | |
| | OCALA, FL 34474 | Address | |
| | | City/ State and Zip Code | |
| | tonychisolm@yahoo.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further information | n concerning this matter, pleas | se call: | |
| Michelle Chislom | | 352 | 299-0496 de & Daytime Telephone Number |
| Name o | of Contact Person | Area Co- | de & Daytime Telephone Number |
| Enclosed is a check fo | r the following amount made | payable to the Florida Depa | artment of State: |
| ■ \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Ame Divi P.O. | ling Address Indment Section Is on of Corporations Box 6327 Is hassee, FL 32314 | Amend Divisio The Co | Address Iment Section In of Corporations In of Tallahassee I. Monroe Street, Suite 810 |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

2023 AUG 28 AMTH: 57

BACK 2 BASICS, INC.

| (Name of Cor | poration as currently | filed with the Florida De | ept. of State) |
|---|---------------------------------|-------------------------------|-------------------------------------|
| P23000054370 | | | 3. <u>11</u> |
| | (Document Number of | Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, its Articles of Incorporation: | Florida Statutes, this I | Florida Profit Corporation | adopts the following amendment(s) t |
| A. If amending name, enter the new name of N/A | f the corporation: | | The new |
| name must be distinguishable and contain the will "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the | "Inc," or "Co". A | | l" or the abbreviation "Corp.," |
| B. Enter new principal office address, if app (Principal office address MUST BE A STREE | | N/A | |
| C. Enter new mailing address, if applicable: | : | N/A | |
| (Mailing address MAY BE A POST OFFICE | | N/A | |
| D. If amending the registered agent and/or r new registered agent and/or the new regis | | | ame of the |
| N/A | over the office and the control | | |
| Name of New Registered Agent | <u> </u> | | |
| | (Florida stre | et address) | |
| New Registered Office Address: | | | , Florida |
| | (| 'City) | (Zip Code) |
| New Registered Agent's Signature, if changing the second of the second and the second as registered as the second as registered as the second | | ith and accept the obligation | ons of the position. |
| | Clausation of N= - D= | nistand to see if all and | |
| | ыдпаште ој меж Ке | gistered Agent, if changing | |
| Check if applicable | | | |

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 | PT | John Doe | |
|-------------------------------|--------------|------------------|---------------------------------------|
| A Change | | | |
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| l) Change | VP | Sarah K. Elyaman | 8630-A E. County Road 466 |
| Add | | | The Villages, FL 32162 |
| X Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | · · · · · · · · · · · · · · · · · · · |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | _ | |
| Add | | | ·- |
| Remove | | | |

| E. <u>11 amer</u> (Attach | nding or adding additional A additional sheets, if necessary, | rucies, enter chai). (Be specific) | nge(s) nere: | | | |
|------------------------------|---|---|------------------|-------------------|-------------|---------------------------------------|
| N/A | | | | | | |
| | | | | . | | |
| | | | | | · | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | · |
| | | | | | | |
| | | - | | | | |
| | | <u> </u> | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | <u></u> | | | |
| | | · · · · · · · · · · · · · · · · · · · | | , | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| . <u>If an ar</u> | nendment provides for an ex ions for implementing the an | change, reclassifi | cation, or cance | llation of issued | shares, | |
| <u>provis</u> (if | not applicable, indicate N/A) | ienument ii not c | omamed m the | amenament usei | <u>1.</u> | |
| V/A | | | | | | |
| | | | | | | <u></u> |
| | | | | | | · · · · · · · · · · · · · · · · · · · |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | - | | | |
| | | | | <u> </u> | | |
| | | | | | | |

.

. .

| 1 : 4 : 1 | |
|--|---------------------------------------|
| date this document was signed. | |
| Effective date if applicable: (no more than 90 days after amendment file date) | · · · · · · · · · · · · · · · · · · · |
| (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 document's effective date on the Department of State's records. | I not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required. | i shareholder |
| The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. | |
| The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by" (voting group) | |
| (voting group) | |
| Bussel 8/14/2023 | |
| Dated | |
| Signature Democration Signature | |
| (By a director, president or other officer - if directors or officers have not been | |
| selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) | |
| Michelle Chisolm | |
| (Typed or printed name of person signing) | |
| CEO | |
| (Title of person signing) | |