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COVER LETTER

TO: Amendment Section
Division of Corporations

BLAIR HOUSE ASSOCIATION:	ON INC			
707802 DOCUMENT NUMBER:				
The enclosed Articles of Amendment and fee are submitted for	filing.			
Please return all correspondence concerning this matter to the fo	ollowing:			
JUDITH N ABURMISHAN				
(Name of	Contact Person)			-
ANA CPA LLC				
(Firm	n/ Company)			
332 TEQUESTA DRIVE #225				-
(,	Address)	. = .		· .
TEQUESTA, FL 33469				
(City/ Sta	ate and Zip Code)			
JUDY@ANACPA.NET				
E-mail address: (to be used for future	e annual report noti	fication)	<u>.</u>
For further information concerning this matter, please call:				·
JUDITH N ABURMISHAN	847 at		456-8687	
(Name of Contact Person)		Code)	(Daytime Telephone l	Number)
Enclosed is a check for the following amount made payable to	the Florida Departn	nent of S	State:	
Certificate of Status Certific	ed Copy ional copy is	Certific Certific	Filing Fee cate of Status ed Copy ional Copy is sed)	
Mailing Address	Street Ad	dress		

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

BLAIR HOUSE ASSOCIATION INC

707802	poration as currently filed with the	Florida Dept. of State)
	/Daw	
Dispose	(Docume	ent Number of Corporation (if known)
amend— to the p	provisions of section 617,1006, Flori	id- c-
arrichament(s) to	o its Articles of Incorporation:	da Statutes, this Florida Not For Profit Corporation 1
A. If amandia_	_	da Statutes, this <i>Florida Not For Profit Corporation</i> adopts the follow
i amenang	name, enter the new name of the	COFFIGERATION.
name must be dis	tinguishahla l	corporation" or "incorporated" or the abbreviation "Corp." or "Inc
<u>"Company" or "</u>	Co." may not be word "	corporation" or "incorporated" or the abbreviation The n
	may not be used in the name.	or the abbreviation "Corp." or "Inc
a, which have be	incia-l co	•
Principal office	incipal office address, if applicable address <u>MUST BE A STREET ADD</u>	331 TEQUETA TO HAZZ
	ADIREET ADI	DRESS) TEQUESTA DR #225
		TEQUESTA, FL 33469
		33707
. Enter new m.	:D:	
(Mailing addre	illing address, if applicable:	
3	iss <u>MAY BE A POST OFFICE BO</u>	y = 331 Tea
	_	TOUTSIA DR #225
		TEQUESTA
		TEQUESTA FL 33469
16		
new register	registered agent and/or registers	d - M
new registered	registered agent and/or registered of agent and/or the new registered of	d office address in Florida, enter the name of the
λt		
140	tme of New Registered Agent: JUD	PITH N ABURMISHAN
		TEQUESTA DRIVE #225
<u>N</u>	ew Registered Office Address:	(Florida street address)
) DEQI	UESTA
		(City) , Florida 33469
Registered Age	nt's Signature to a	(Cin Co. L.)
eby accept the ap	nt's Signature, if changing Registe	red Agent:
•	and a registered agent. I am	familiar with and accept the obliner
	$\langle \ \rangle$	red Agent: In familiar with and accept the obligations of the position.
	\h.	Hard is DA
	7/4	anchin a Community of
	1/	Signature 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

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,

Example: X Change PT John Doe X Remove V Mike Jones X Add SV Sally Smith Type of Action (Check One) Title Name Address	noted as John Doe, PT as a C
(Check One) Name	<u>s</u> s
I) Change P DON SCHLUETER 331 TEQUE Add Add TEQUE	OUESTA DRIVE 3225 STA, FL 33469
2) Change P JOHNNY MERTENS 5914 Riv	ver Club Circle
3) Change Add	R. FL 33458
4) Change	
Remove	
Add	
Remove	
Add	
Remove	
E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)	

		
<u>.</u>		
		• 2
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		12
ne date of each amendment(s) a se this document was signed.	doption: 5/11/2023	, if other than the
	/2023	, if other than the
п мррисаріе;	<u></u>	
te: If the date inserted in this blo cument's effective date on the De	(no more than 90 days after amendment file ock does not meet the applicable statutory filing requartment of State's records.	Quirements, this data will !
option of Amendment(s)		, will not be listed as the
	(CHECK ONE)	
The amendment(s) was/were ad	lopted by the members and the number of votes cas l.	of for the

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 05/11/2023			
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)			
JOHNNY MERTENS			
(Typed or printed name of person signing)			
PRESIDENT			

(Title of person signing)