

N21000010024

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

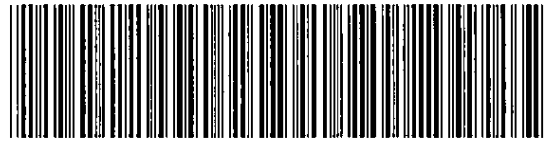
(Document Number)

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A. Butler

2/14/24

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2024 FEB 14 AM 11:25
CLERK OF COURT

AC

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BLIND DANCE MUSIC AND FILM FESTIVAL INCORPORATED

DOCUMENT NUMBER: N21000010024

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Hollimon

(Name of Contact Person)

Hollimon PA

(Firm/ Company)

118 North Gadsden Street

(Address)

Tallahassee, FL 32301

(City/ State and Zip Code)

bill@hollimonpa.com

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

For further information concerning this matter, please call:

Bill Hollimon

850-508-3956

at

(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:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed) |
|---|--|---|--|

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

BLIND DANCE MUSIC AND FILM FESTIVAL, INCORPORATED

(Name of Corporation as currently filed with the Florida Dept. of State)

N21000010024

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

BlindCAN Incorporated

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

630-10 Railroad Square

Tallahassee, FL 32310

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

630-10 Railroad Square

Tallahassee, FL 32310

D. If 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 address:

Name of New Registered Agent: N/A

New Registered Office Address:

(Florida street address)

_____, Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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2024 FEB 14 AM 11:25

STATE

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:

| | | |
|--|-----------|--------------------|
| <input checked="" type="checkbox"/> Change | <u>PT</u> | <u>John Doe</u> |
| <input checked="" type="checkbox"/> Remove | <u>V</u> | <u>Mike Jones</u> |
| <input checked="" type="checkbox"/> Add | <u>SV</u> | <u>Sally Smith</u> |

| <u>Type of Action</u> (Check One) | <u>Title</u> | <u>Name</u> | <u>Address</u> |
|--|-------------------|----------------------|--|
| 1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove | <u>TD</u> | <u>Jon Fox</u> | <u>1505 W THARP ST UNIT 2534</u> <u>TALLAHASSEE, FL 32304</u> |
| 2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove | <u>TD</u> | <u>Bill Hollimon</u> | <u>118 NORTH GADSDEN STREET</u> <u>TALLAHASSEE, FL 32301</u> |
| 3) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>SD</u> | <u>Scott Tennant</u> | <u>1505 W THARP STREET UNIT 2</u> <u>TALLAHASSEE, FL 32304</u> <u>6923 STONE MEADOW DRIVE</u> <u>DALLAS, TX 75230</u> |
| 4) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u>PD</u> | <u>Ben Fox</u> | <u>1505 W THARP STREET UNIT 2</u> <u>TALLAHASSEE, FL 32304</u> <u>710 WAILES STREET, APT4</u> |
| 5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u> </u> | <u> </u> | <u>TALLAHASSEE, FL 32310</u> <u> </u> <u> </u> |
| 6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove | <u> </u> | <u> </u> | <u> </u> <u> </u> <u> </u> |

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Explanation of changes to Officers and Directors above:

Jon Fox, current TD is removed from the corporation; Bill Hollimon replaces as TD

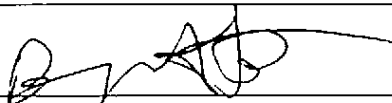
Address change for Scott Tennant, SD

Address change for Ben Fox, PD

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

☐ 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 December 22, 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)

Ben Fox

(Typed or printed name of person signing)

President, Director

(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2024

WILLIAM HOLLIMON
118 NORTH GADSDEN STREET
TALLAHASSEE, FL 32301

SUBJECT: BLINDCAN INCORPORATED
Ref. Number: N21000010024

We have received your document for BLINDCAN INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

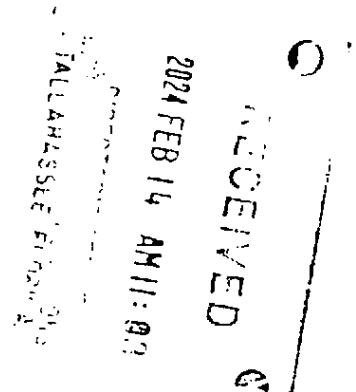
The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 424A00001864





FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 29, 2024

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Anissa Butler
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