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(Red	questor's Name)	
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(City	//State/Zip/Phone #)
PICK-UP	WAIT	MAIL
/Bus	siness Entity Name	<u> </u>
(540	aniose Emily Ma,me,	,
(Doc	cument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to F	Filing Officer:	
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TILLY OF STATE

NEWEIVED

MRS

COVER LETTER

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

SUBJECT: Blaze Apparel - PROPOSED CORPOR	Inc
(PRФPФSED CORPOR	ATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the ar	ticles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Le Nedra E. Nan	`
320 Blount S	Address
Tallahassee, -	Horida 32301
850-212-562 Daytime	7 Telephone number
•	ed to future annual report notification)

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NA	ME ation shall be: Blaze Appaire (]	Inc.
ARTICLE II PR	INCIPAL OFFICE	
221	Principal <u>street</u> address Blount, St.	Mailing address, if different is:
70	110 ha see 71 32301	
ARTICLE III PUI	PPOSE	
	the corporation is organized is:	
		AR 등 기
		SE SE
ARTICLE IV SH	ARES	ಗ್ಲಾ 🧎
The number of shares of		ک یں کے ⊏
	•	ORE 36
ARTICLE V INI Name and Title:	TIAL OFFICERS AND/OR DIRECTORS COLL LENGRA (A) F. 1504 (. C.E.D. Name:	and Title:
Address:	320 Blownt St. Addres	
	Tallahassee, 71 32301	
	0.1	
Name and Title:_	Crissy Wey CEO Name	and Title:
Address: =	Tallahassee 7 3230)	šs:
_	ia lanaste, or sesoi	
	Gasenia Caraballo Secreto	2ny
Name and Title:	320 Blownt St. Address	
Address.	TUH: 71 32301	
ARTICLE VI RE	GISTERED AGENT	
	street address (P.O. Box NOT acceptable) of the regis	tered agent is:
Name:	Lenedra Isaac	
Address:	76 Mizell SI.	
	ORPORATOR	
The <u>name and address</u> Name:	Crissy Coley	
Address:	Crissy Coley 320 Blownt st. Tallahassee, 71 32301	
	Tallahassee, 71 32301	
Having been named as	registered_agent to accept service of process for the	above stated corporation at the place designated in
his certificate, I am fan	niliar with and accept the appointment as registered ag	ent and agree to act in this capacity
' The sale	nd bus	10/11/
Attions	Required Signature/Registered Agent	<u>le/14/11</u>
		Date
subjett this document	and affirm that the facts stated herein are true. I a	m aware that the false information submitted in a
locy(ment to the Depart	ment of State constitutes a third degree felony as provi	ded for in s.817.155, F.S.
Land.	sluly	10 - 12h. M
	Required signature/Incorporator	
	• // -	