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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

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NAME OF CORP	ORATION: THE BLASE CAR	FE, CORP.	
DOCUMENT NU	MBER:		
The enclosed Artici	es of Amendment and fee are su	bmitted for filing.	
Please return all con	respondence concerning this ma	tter to the following:	
	KEVIN A. SKIEST		
	· · · · · · · · · · · · · · · · · · ·	Name of Contact Persor	)
	THE BLASE CAFE, CORP.		
		Firm/ Company	
	5263 OCEAN BOULEVARI	D #9	
		Address	
	SARASOTA, FL 34242		
		City/ State and Zip Code	
	KSKIEST@AOL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, pleas	se call:	
JON R. FAHS, JR.		941 at (	485-1571
Nan	e of Contact Person		de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 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)
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

THE BLASE' CAFE, CORP. (Name of Corporation as currently filed with the Florida Dept. 2021 SEP 27 AH 11: 09 P97000003674 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) 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: KEVIN A. SKIEST Name of New Registered Agent 5263 OCEAN BOULEVARD #9 (Florida street address) SARASOTA New Registered Office Address: (City) 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.

rare of New Registered 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)

Example:

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.

X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	D	_	CYNTHIA J. BRESLIN	5263 OCEAN BOULEVARD #9
Add				SARASOTA, FL 34242
Remove  2) Change	PTSD	_	KEVIN A. SKIEST	5263 OCEAN BOULEVARD #9
Add				SARASOTA, FL 34242
Remove 3) Change		_		
Add				<del></del>
Remove				<del></del>
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

-	nending or adding additional Art ich additional sheets, if necessary).	(Be specific)			
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lf an	amendment provides for an exc visions for implementing the am	hange, reclassificati	ion, or cancellation	of issued shares,	
<u>p. 0.</u>	(if not applicable, indicate N/A)	endirent in not cont	and the second		
/A					
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The date of each amendment(s) ac	N/A loption:	, if other than
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amen	idment file date)
Note: If the date inserted in this b document's effective date on the De		ing requirements, this date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors	without shareholder action and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes fficient for approval.	cast for the amendment(s)
	proved by the shareholders through voting group each voting group entitled to vote separately of	
"The number of votes cast	for the amendment(s) was/were sufficient for a	pproval
by N/A		19
~/ <del></del>	(voting group)	<del></del> ·
Dated	13/2021	
selecte	ire for a resident or other officer – if directors of by an incorporator – if in the hands of a received fiduciary by that fiduciary)	
	KEVIN A. SKIEST	
	(Typed or printed name of person s	igning)
	PRESIDENT and DIRECTOR	
	(Title of person signing)	

the

the

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