

LI6000032374

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

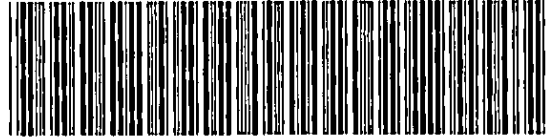
Certified Copies _____ Certificates of Status _____

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S. PRATHER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 31, 2018

RITUAL INKING & PIERCING TATTOO LLC 2nd mailing
JUAN A ESPINOSA
4738 OKEECHOBEE BLVD.
WEST PALM BEACH, FL 33417

SUBJECT: RITUAL INKING & PIERCING TATTOO LLC
Ref. Number: L16000032374

We have received your document for RITUAL INKING & PIERCING TATTOO LLC 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 form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

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) 245-6051.

Karen A Saly
Regulatory Specialist II

Letter Number: 918A00014401

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RITUAL INKING & PIERCING TATTOO, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN A. ESPINOSA

Name of Person

RITUAL INKING & PIERCING TATTOO

Firm/Company

4738 OKEECHOBEE BOULEVARD

Address

WEST PALM BEACH, FL 33417

City/State and Zip Code

AV. 01 @ ME.COM

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

For further information concerning this matter, please call:

JUAN ESPINOSA

Name of Person

at (561) 531-2287

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee.
Certificate of Status &
Certified Copy
(additional copy is enclosed)

★ \$35 CHECK WAS ALREADY SENT.

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

RITUAL INKING & PIERCING TATTOO, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on JULY, 25 2018 and assigned
Florida document number L16000032374

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

TATTOO PROS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

SAME AS BEFORE

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N / A

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

N / A

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
N / A	N / A	N / A	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

N/A.

E. Effective date, if other than the date of filing: JULY 25, 2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated JULY 25TH, 2018

Juan A. Espinosa

Signature of a member or authorized representative of a member

JUAN. A. ESPINOSA

Typed or printed name of signee

Florida Division of Corporations

Rf/:

Articles of Amendment

Ritual Inking & Piercing Tattoo, LLC

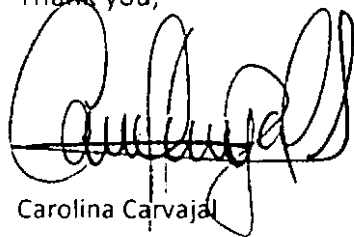
L16000032374

On July 12, 2018 We filled out an amendment form for Corporations instead of an amendment form for an LLC, a check for \$35 was sent to pay for filing fees.

We are sending now the correct amendment form for an LLC.

Should you have any questions, please feel free to contact me at any time.

Thank you,

A handwritten signature in black ink, appearing to read 'Carolina Carvajal', written over a horizontal line.

Carolina Carvajal

954 870 8135 - CCQ79@HOTMAIL.COM