Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000431924 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

	Division of Corporations	
	Fax Number : (850)617-6383	7, 2
From:		2521 DEC
	Account Name : LEGALZOOM.COM INC.); R
	Account Number : I20010000062	
	Phone : (323)962-8600	် မြ
	Fax Number : (323)962-3889	ည်းသို့ ထ
		I
••Enter	the email address for this business entity to be used	for future _
••Enter anı	the email address for this business entity to be used nual report mailings. Enter only one email address pla	for future
anı	nual report mailings. Enter only one email address pla	for future sase.
anı	the email address for this business entity to be used nual report mailings. Enter only one email address place all Address:	for future sase. ***
anı	nual report mailings. Enter only one email address pla	for future pase.**
anı Em	nual report mailings. Enter only one email address ple	
anı Em	nual report mailings. Enter only one email address pla	

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

à	

COVER:LETTER

TO:

Registration Section Division of Corporations

STUDIO 50 TATTOO, LLC

SUBJECT:

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:

	Cheyenne Moseley		
•	Name of Person		
	Legalzoom.com, Inc.		<u>~</u> 2
	Firm/Company		252 3 DEC
	101 N Brand Blvd 11th Fl		EC I
	Address	t	8
	Glendale, CA 91203		: 11
	City/State and Zip Code		91:
	Travis.hogue@yahoo.com E-mail address: (to be used for future annual report notification)		
For further information	concerning this matter, please call:		
Cheyenne Moseley	800 773-0888 at ()		_
Name	of Person Area Code Daytime Telephone t	Number	_

Enclosed is a check for the following amount:

🗆 \$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)

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 Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STUDIO 50 TATTOO, LLC	
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000325151</u>	were filed on 10/14/2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Art of Ink LLC	
The new name must be distinguishable and contain the words "Limited Liabit	ity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	3053 Commercial Way
(Principal office address MUST BE A STREET ADDRESS)	Spring Hill, Florida 34606
Enter new mailing address, if applicable:	3053 Commercial Way
(Mailing address MAY BE A POST OFFICE BOX)	Spring Hill, Florida 34606
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	e: 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 = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			□ Change
			☐ Remove
			Change
			Add
			E Remove
			Change
			□ Remove
			☐ Change
			Add
			C Remove
			□ Change

		. <u></u>	
		<u>.</u>	
			
		<u></u> :::	23
	-		7 <u>7</u>
		<u> </u>	_
		<u>.</u>	
		•	P
		· · · · · · · · · · · · · · · · · · ·	PH I:
		idina	-6
			
ctive date, if other than the date of filing:		(optional)	
ctive date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date lf the date inserted in this block does not meet the applicable st	of filing or more than 90 c	lays after filing.) Put	rsuant to 605.
e: If the date inserted in this block does not meet the applicable siment's effective date on the Department of State's records.	miliory little requirem	.d.s. 11115 0010 11111	
record specifies a delayed effective date, but not an	effective time, at 1	2:01 a.m. on	the earlie
ne 90th day after the record is filed.			
112/07/2020			
$\frac{12}{07}/2020$			
	_		
Signature of a member or authorized			

Page 3 of 3

Filing Fee: \$25.00