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COVER LETTER

TO: Amendment Section

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

Division of Corpo	prations		
NAME OF CORPOR	EATION: Tatt	700S 64 S	tefan, INC.
DOCUMENT NUMB	BER: P 0 9 00	0076705	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Stefan Taltoos 6	Meiss	<u>e</u>
	- / 1	Name of Contact Perso	n
	Tattoos &	y Stu	-1 /11C.
•		Firm/ Company	
_	500 80	2 6945 Su	108th St.
	Ocala,	FC. 344	171
		City/ State and Zip Cod	le
	Stefaumeis E-mail address: (to be us	Se (a) Yah sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
SteFan	- Meisse	- at (352	3 4 8-11 8 O ode & Daytime Telephone Number
Name o	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
☐ \$35 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)
<u>Mail</u>	ing Address	Street	Address

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

to

Articles of Incorporation of

- Ll., 1 lo	2 h a C a 4	1.70. 6	
TATTOOS DY	STETAN	Fluida Dant of State	
(Name of Corporation as cu	rrently med with the	g Florida Dept. o <u>r S</u> tate)
(Document Num	nber of Corporation (i	f known)	
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this <i>Florida Profit</i> (Corporation adopts the	following amendment(
A. If amending name, enter the new name of the corporation	on:		
			The new
name must be distinguishable and contain the word "corp," "Inc.," or Co.," or the designation "Corp," "Inc., word "chartered," "professional association," or the abbrevia	" or "Co". A profes	" or "incorporated" o ssional corporation nam	r the abbreviation e must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		··	
			<u></u>
			
C. Enter new mailing address, if applicable:			E B T
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			- 중 - 중 -
			<u> </u>
			<u> </u>
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office at		enter the name of the	5 I
Name of New Registered Agent			
name of the regimental right	 -		
(Flor	rıda street address)		
New Registered Office Address:		, Florida_	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered a	Agent:		
I hereby accept the appointment as registered agent. I am fan		the obligations of the pe	osition.
Signature of .	New Registered Agen	t, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, 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 = C Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of 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. Ther 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 Chan Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT Je	<u>ohn Doe</u>	
X Remove	<u>V</u> <u>M</u>	like Jones	
X Add	<u>sv</u> <u>sa</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Christie Lee Tawney	500 SW 10451. Ste #103
Add Remove			Ste#103 O(ala, FL. 3447/
2) Change			
Add Remove			
3) Change			
Add			
Remove			
4) Change	* ************************************		
Add			
Remove			
5) Change			
Add Remove			
6) Change			
Add Remove			

	ling additional Articles, enter change(s) here: heets, if necessary). (Be specific)
	<u> </u>
	
<u> </u>	
<u>.</u>	
<u>If an amendment p</u>	rovides for an exchange, reclassification, or cancellation of issued shares,
provisions for imp	blementing the amendment if not contained in the amendment itself:
(іј пот арриса	ble, indicate N/A)
-	

The date of each amendment(s) adoption:date this document was signed.	8/27/19	, if other than
-	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of	ot meet the applicable statutory filing requirements, State's records.	this date will not be listed as
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	shareholders. The number of votes east for the amend approval.	dment(s)
	e shareholders through voting groups. The following group entitled to vote separately on the amendment(
"The number of votes cast for the amen	ndment(s) was/were sufficient for approval	
by		
(vot	ing group)	
☐ The amendment(s) was/were adopted by the laction was not required.	board of directors without shareholder action and sha	reholder
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareho	lder
Dated 8/27	= Mlin	
Signature _ Mi	= Mein	
(By a director,/presi	ident or other officer - if directors or officers have no	
selected, by fin inco appointed fiduciary	orporator – if in the hands of a receiver, trustee, or other by that fiduciary)	ier court
St	efan Meisse	
(Typed or printed name of person signing)	
Presi	ident	
	(Title of person signing)	

as