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(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone) #)
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SECRETE Y JF TOATS
TALL ARASAN FOR CORD

OCT 06 2016 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TATTOO TATTO	O CORPORATION		
	BER: P16000060984			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	MANUEL NUNEZ			
	-	Name of Contact Person	1 .	
	TATTOO TATTOO CORPORATION			
		Firm/ Company		
	6741 CORAL WAY 47-48-4	•		
		Address		
	MIAMI, FL 33155			
		City/ State and Zip Code		
FELI	UTAX@YAHOO.COM			
	-	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
MANUEL NUNEZ		at (305	. 4180052	
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number	
•			•	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address		Address	
	endment Section		ment Section	
	ision of Corporations		n of Corporations	
· =	. Box 6327	Clifton Building		

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

SECRETARY OF STATE
TALEARASON RESIDER

16 OCT -3 AM IO: 11

(Name of Corneration as augment)			
(trame of Corporation as currently	filed with the Florida Dept. of State)		
P16000060984			
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this lits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
INK TATTOO CORPORATION	The new		
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "Inc."	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	5733 SW 8 STREET		
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 33144		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6741 CORAL WAY STE 47-48-49		
	MIAMI, FL 33155		
	11-11-2		
	ace in Florida, antor the name of the		
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ess in Florida, enter the name of the		
new registered agent and/or the new registered office address:	ess in Florida, enter the name of the		
new registered agent and/or the new registered office address:	ess in Florida, enter the name of the		
new registered agent and/or the new registered office address: Name of New Registered Agent N/A			
new registered agent and/or the new registered office address:			

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) , ...

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.

Example: X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>SV</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change		_		-	
Add				-	
Remove				,	 .
2) Change					
Add		_		-	
Remove					
3) Change				_	
Add					
Remove				•	
4) Change					
Add				-	
Remove				-	
				•	
5) Change		_		-	
Add			,	-	
Remove				-	
6) Change		_		_	
Add				-	
Remove					

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	•
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
	·
A-10-10-10-10-10-10-10-10-10-10-10-10-10-	

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after umendment file	date)
Note: If the date inserted in this block does not meet the applicable statutory filing require document's effective date on the Department of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	e amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The folemust be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
09/20/2016 Dated	
baled	
Signature 7	
(By a director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, trusted appointed fiduciary by that fiduciary)	
MANUEL NUNEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	