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SEP 2 ' \$2.10

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FADE MONSTER	S BARBERSHOP INC	
DOCUMENT NUMB			
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
1	RAYNEL J. VEGA		
-		Name of Contact Person	n
1	ADE MONSTERS BARBE	ERSHOP INC	
-		Firm/ Company	
•	9267 SAN CARLOS BLVD	rum company	
-	<del>.</del>	Address	<del> </del>
1	FORT MYERS, FL US 3396	7	
-		City/ State and Zip Cod	e
microi	nkhairsolutions@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
RAYNEL J VEGA		239	200-0089
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	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)
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

## FADE MONSTERS BARBERSHOP INC

UNAME OF COLOURATION AS CULLED	tly tilad with the blazide lient /	( State)
P19000060675	tly filed with the Florida Dept. o	or state)
(Document Number	of Corporation (if known)	<del></del>
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation ado	ots the following amendment(s
A. If amending name, enter the new name of the corporation:		
MicroINK Hair Solutions Inc		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation	ited" or the abbreviation
3. Enter new principal office address, if applicable:	Raynel J Vega	19 FAL
Principal office address <u>MUST BE A STREET ADDRESS</u> )	9267 San Carlos Blvd	SER TI
	Fort Myers, Fl 33967	12 H
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		20   
I If amanding the registered egent and/or registered office ad-	tross in Florida, antar the name	oftho
). If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		of the
new registered agent and/or the new registered office address		of the
		of the
new registered agent and/or the new registered office address  Name of New Registered Agent		of the
Name of New Registered Agent	treet address)	of the

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

Example: 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>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Raynel J Vega	9267 San Carlos Blvd
x Add			Fort Myers, Fl 33967
Remove			
2) Change	VP	Crystal Garcia	9267 San Carlos Blvd
x Add			Fort Myers, Fl 3396 F
Remove			SE SE
3) Change			
Add			宝 王 丁
Remove			9: 20 ORIBA
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

sints to Channer of Marca, Mismathiy II (2001 6) and the	
ticle I: Chage of Name, MicroINK Hair Solutions Inc	
	<del>.</del>
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	<del></del>
	•
	19 s
	SEP -
	12 See 12
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	20.
(if not applicable, indicate N/A)	99. 174.
,	15 Z
	·

	09/09/2019	
The date of each amendment(s) adop	tion:	, if other than
date this document was signed.		
Effective date if applicable:		
<del></del>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date rtment of State's records.	will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.	
• •	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
action was not required.	ed by the board of directors without shareholder action and shareholder ed by the incorporators without shareholder action and shareholder	19 SEP
09/09/2019 Dated	77	
Signature	Kay ///	9: 20 siai
selected,	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	· 0
Ra	aynel J Vega	
_	(Typed or printed name of person signing)	
Pr	esident	
_	(Title of person signing)	

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