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.

(((H22000100510 3)))



H220001005103ABCL

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

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

Enter the email address for this business entity to be used for future; annual report mailings. Enter only one email address please.

Email Address:____

OZZHAR I 7 PM 3:5 ECHETANI GOSTAT TALLAHASSEG, PL

COR AMND/RESTATE/CORRECT OR O/D RESIGN WIGS BY NORELL INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

MAR 1 8 2022

ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

WIGS BY NORELL INC				
Florida Document Number: P2000	00019529			
Pursuant to the provisions of section 6 following amendment(s) to its Articles	07.1006, Florida Statute of Incorporation:	s, this Florida Profit Co	rporation adopts	the
Changing name to Taina Norell En	tertainment Inc			
			~1	
			7022 MAR	n
			到二	
			SEG 3	0
			: 36 FATE	
	<u> </u>			<u></u> _
				<u></u> .
These articles of amendment were adopted	on <u>03/16/2022</u>			
The corporation has only one group of votivotes cast for amendment was sufficient for		t was approved by the share	holders and the nun	nber of
Ada Arencib	ia (p) Printed Name and Titl	c .		
New Registered Agent's Signature, if chang thereby accept the appointment as registered a	ging Registered Agent gent. I am familiar with and	accept the obligations of the n	ocition	

Signature of New Registered Agent, if changing