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COVER LETTER

'O: Amendment Section Division of Corporations

IAME OF CORPORATION: Better Ratio Inc.					
DOCUMENT NUMBER: P 200, 00086974					
'he enclosed Articles of Amendment and fee are submitted for filing.					
lease return all correspondence concerning this matter to the following:					
Daniel Hainje					
Name of Contact Person					
Better Ratio inc.					
Firm/ Company					
1426 SE 12th Terrace					
Address					
Cape Coral, F1, 33990 City/ State and Zip Code					
City/ State and Zip Code					
Hoiniedon @ Yohooxam					
Hain jedan @ Yahoo com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call: Qunie! Hainje at (612) 382-1564					
Name of Contact Person at (612) 382 - 1564 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee S43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & S52.50 Filing Fee & Certificate of Status (Additional copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

o	f

Better Ratio Inc.		
(Name of Corporation as curr	rently filed with the Florida Dept. of State)	
P200.000869.7H	·	
(Document Numb	per of Corporation (if known)	
rsuant to the provisions of section 607.1006, Florida Statutes, Articles of Incorporation:	this Florida Profit Corporation adopts the following amends	ment(s)
If amending name, enter the new name of the corporation	<u>ı:</u>	
Madd Hatter Salon Inc. me must be distinguishable and contain the word "corporation	The no	ew
me must he distinguishable and contain the word "corporation nc.," or Co.," or the designation "Corp," "Inc," or "Co hartered," "professional association," or the abbreviation "F	". A professional corporation name must contain the wo	., " ord
Enter new principal office address, if applicable:	730 SW Fourth St	
rincipal office address MUST BE A STREET ADDRESS)	730 SW Fourth St. Cape Cord, Fl 33991	· -
		_
		_
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		_
		_
		_
If amending the registered agent and/or registered office		
new registered agent and/or the new registered office add	ress:	
Name of New Registered Agent		
(Florid	da street address)	
New Registered Office Address:	Florida	
	(City) (Zip Code) 🖂	_
	ال ب	i 1
w Registered Agent's Signature, if changing Registered Agereby accept the appointment as registered agent. I am family	gent: liar with and accept the obligations of the position	
леву иссері іне арронитені из гедізіегей адені. Тат јати	iar with and accept the conigutions of the position.	
Signature of Ne	ew Registered Agent, if changing	

Cleck if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

mending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and lress of each Officer and/or Director being added:

ach additional sheets, if necessary)

ase note the officer/director title by the first letter of the office title:

President: V= Vice President: T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief recutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. sident, Treasurer, Director would be PTD.

anges 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 hange, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, ke Jones, V as Remove, and Sally Smith, SV as an Add.

Change	<u>PT</u>	John Doe			
¿ Remove	<u>v</u>	Mike Jones			
∑ Add	<u>sv</u>	Sally Smith			
the of Action (heck One)	Title	Name	<u>Addres</u> s		
Change					
Add					
Remove					
) Change					
Add					
Remove Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		_			
Add		· ————			
Remove					

amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)	
<u> </u>	
	
	. <u> </u>
	•
	
an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
	 -
	<u> </u>

date of each amendment(s) adoption: _	22	0ءد	2020	, if other than the
this document was signed.				
ective date if applicable:	ZA	1 50	n 2021	
tive date in apprecion.	(no mo	re than	90 days after	amendment file date)
e: If the date inserted in this block does ument's effective date on the Department of	not meet of State's	the appl records.	icable statuto	ory filing requirements, this date will not be listed as the
option of Amendment(s) (C	<u>HECK O</u>	<u>NE</u>)		
The amendment(s) was/were adopted by th action was not required.	e incorpoi	rators, or	board of dir	ectors without shareholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo			he number of	votes cast for the amendment(s)
The amendment(s) was/were approved by t must be separately provided for each votin	he sharch Ig group e	olders th	rough voting vote separa	groups. The following statement tely on the amendment(s):
"The number of votes cast for the am	endment(s) was/w	ere sufficien	t for approval
by <u>Daniel Hainje</u> (5)	ole inco	<u> ღიეაი</u> დე	iter)	
Dated 28 Dec	<u></u>			
	corporato	r – if in t	he hands of	ctors or officers have not been a receiver, trustee, or other court
	Da	niel	Hainje	· · · · · · · · · · · · · · · · · · ·
	(Typed o	or printed	l name of pe	rson signing)
	(Title of	rinci	nle	
	(Title of	person s	igning)	