P21000003525

(Re	questor's Name)	-
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	∋ #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: Tight Line Tattoo	Collective, Inc.		
	1BER: P21000003525			
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		
Please return all cor	respondence concerning this ma	atter to the following:		
	B. Alan Dubrow			
		Name of Contact Person	n	
	Dubrow Duker & Associates			
		Firm/ Company		
	4501 N. University Drive Su	• •		
		Address		
	Coral Srings, FL 33067			
		City/ State and Zip Cod	e	
	officeadmin@dubrowduker.c	com		
	•	sed for future annual report	notification)	
For further informati	ion concerning this matter, plea	se call:		
B. alan Dubrow		954 at (de & Daytime Telephone Number	
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:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street	Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
	D. Box 6327	The Centre of Tallahassee		
	llabassee EL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Tight Line Tattoo Collective, Inc.

(Name of Corporate	on as currently filed with the Florida Dept. of State)
P21000003525	
(Docur	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	orporation:
Tight Lines Tatto Collective, inc.	The new
name must he distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbr	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable	
(Principal office address <u>MUST BE A STREET AD</u>	<u>ORESS</u>)
	
C. Enter new mailing address, if applicable:	<u> </u>
(Mailing address MAY BE A POST OFFICE BO	<u> </u>
	<u></u>
	
	<u> </u>
D. If amending the registered agent and/or registe	red office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	Elasida
New Registered Office Address.	, Florida
New Registered Agent's Signature, if changing Res	istered Agent:
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.
C:	atura of Naw Pagistared Arant if abanging
Sign	ature of New Registered Agent, if changing

Check if applicable

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

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)

Example:

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.

X Change	PT	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)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				. =
5) Change		-	4-17-18-18-18-18-18-18-18-18-18-18-18-18-18-	
Add				
Remove				
6) Change		_		
Add				
Remove				

	g additional Articus, if necessary).	(Be specific)			
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f an amendment prov	vides for an exch	ange, reclassifica	tion, or cancellat	ion of issued sha	res,
provisions for impler (if not applicable,	menting the amer	idment if not con	tained in the am	endment itself:	
(іј ног пррисате,	indicine (vin)				
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		· · · · · · · · · · · · · · · · · · ·	.		

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
Effective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	idopted by the incorporators, or board of directors without shareholder action	1 and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	ı
	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
Dated Signature	director, president or other officer - if directors or officers have not been	
seico	director, president or other officer - if directors or officers have not been ted, by an incorporator - if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	Travis Brown	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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