From: Yanet Avila

Florida Department of State

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MADE IN DADE TATTOO INC

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Articles of Amendment to Articles of Incorporation

2022 LUG 19 Fii 12: 30

to

| | of | | 7, 17, 1 |
|--|---|-------------------------------------|------------------------|
| MADE IN DADE TATTOO INC | | | <i>.</i> : |
| (Name | of Corporation as currently file | ed with the Florida Dept. of State | <u> </u> |
| P21000104918 | | | - |
| | (Document Number of Cor | poration (if known) | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | .1006, Florida Statutes, this <i>Flori</i> | da Profit Corporation adopts the | following amendment(s) |
| A. If amending name, enter the new n | ame of the corporation: | | |
| | | | The new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "("chartered," "professional association, | Corp." "Inc." or "Co". A pro | | |
| B. Enter new principal office address, | | | |
| (Principal office address <u>MUST BE A S</u> | (REET ADDKESS) | | |
| | _ | - | |
| | | - | |
| C. Enter new mailing address, if appl | icable: | | |
| (Mailing address MAY BE A POST | <u>OFFICE BOX</u>) | | |
| | | | |
| | | | |
| | _ | | |
| If amending the registered agent an new registered agent and/or the new registered agent and/or the new registered. | | n Florida, enter the name of the | |
| | CHANGE OF ADDRESS | | |
| Name of New Registered Agent | | | |
| | 5401 SW 131 TERR | | |
| | (Florida street ad | • | |
| New Registered Office Address: | MIRAMAR | , Florida | 3027 |
| | (City) | | (Zip Code) |
| | | | |
| N'ana Panglana da Angada Olamana ang a | North a Brook and Alberta | | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist | nanging Registered Agent: ered agent. I am familiar with a | nd accept the obligations of the po | sition. |
| , | , | , g y y. | |
| | Docuðigned by: | | |
| | AN | | |
| | Signature of New Registe | red Agent, if changing | |
| | | | |

Check if applicable

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

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If smending 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.

| X Change | <u>PT</u> <u>Jol</u> | hn Doe | |
|-------------------------------|----------------------|------------------|---------------------------------------|
| X Remove | <u>y</u> <u>M</u> i | ike Jones | |
| X Add | <u>SV</u> <u>Sa</u> | lly Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) XX Change | P | ALEXIS SCHPREJER | 5401 SW 131 TERR |
| Add | | | MIRAMAR, FL 33027 |
| Remove | | | · · · · · · · · · · · · · · · · · · · |
| 2) XX Change | VP | DAIRON CARDENAS | 1225 W 35TH ST |
| Add | | | APT 9A |
| Remove 3) Change | | | HIALEAH, FL 33012 |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | . | | _ |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| • | Page: 5 of 6 | 2022-08-19 17:36:42 GMT | 13053284774 | From; Yanet Avila |
|------------------|---------------------------------------|---|-------------------|-------------------|
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| E. If an | nending or adding addit | tional Articles, enter change(s) here: | | |
| (Atta | ch additional sheets, if ne | cessary). (Be specific) | | |
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| F. <u>If a</u> n | amendment provides for | or an exchange, reclassification, or cancellation | of issued shares, | |
| pro | <u>visions for implementin</u> | g the amendment if not contained in the amen- | dment itself: | |
| | (if not applicable, indica | ue N/A) | | |
| - | | | | |
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To:

DocuSign Envelope ID: 584E16C2-FF48-4633-B99F-47A90B55A8EC 08/19/2022 , if other than the The date of each amendment(s) adoption: date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. (CHECK ONE) Adoption of Amendment(s) ☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. 🗏 The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voting group) 08/19/2022 Dated Signature (By a director, president of other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) ALEXIS SCHPREJER (Typed or printed name of person signing) P (Title of person signing)