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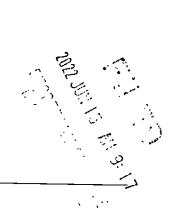
TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: TINIBU HAIR B	Y MR. G INC.			
DOCUMENT NUMBE					
The enclosed Articles of	f Amendment and fee are s	submitted for filing.			
Please return all corresp	ondence concerning this m	natter to the following:			
Α	NTOINETTE REYES				
_		Name of Contact Perso	on	 -	
Α	RIES INCOME TAX PRE	EPARATION INC.			
	<u> </u>	Firm/ Company	·		
10	D5 E LANCASTER ROAD	•			
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C	ORLANDO, FLORIDA 32809				
		City/ State and Zip Coo	le		
SF	REYES8593@GMAIL.CO	M			
_	E-mail address: (to be u	sed for future annual repor	t notification)	202	
For further information c	oncerning this matter, plea	se call:			
ANTOINETTE REYES		407	802-4615	iber CO	
Name of C	Contact Person	Area Co) 802-4615 ode & Daytime Telephone Num	iber :	
Enclosed is a check for th	ne following amount made	payable to the Florida Dep	artment of State:	iber co	
■ \$35 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)		
	Address ment Section		Address		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



TINIBU HAIR BY MR. G INC.

(Name of Corporat	tion as currently filed with the Florida Dept. of S	tate)
P22000043152		· · · · ·
(Document)	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florid its Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the	he following amendment(s) to
A. If amending name, enter the new name of the c	orporation:	
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp." "Inc, "chartered," "professional association," or the abbre	Of (O) A professional appropriate a sum on	The new abbreviation "Corp.," nust contain the word
B. <u>Enter new principal office address, if applicable</u> (Principal office address <u>MUST BE A STREET ADI</u>	e: DRESS)	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u> </u>	
). If amending the registered agent and/or register	red office address in Elevida anton the server follows	
new registered agent and/or the new registered	office address:	<u>1¢</u>
Name of New Registered Agem		
	(Florida street address)	
New Registered Office Address:	, Florid	•
	(City)	a (Zip Code)
iow Registered Agent's Signature, if changing Regi hereby accept the appointment as registered agent. I	stered Agent: I am familiar with and accept the obligations of the part of th	position.
Siynai	ture of New Registered Agent, if changing	
heck if applicable	y g ng.m. y changing	
The amendment(s) is/are being filed pursuant to s. 60	07.0120 (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)

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.

Example:

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	P	ANTOINETTE REYES	2891 MOSSHIRE CIRCLE
Add			ST CLOUD, FL 34772
X Remove			-
2) Change	P —	GEORGE RODRIGUEZ	2891 MOSSHIRE CIRCLE
X Add			ST. CLOUD, FL 34772
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
) Change			
Add			
Remove			
) Change			
Add			
Remove			-

f amending or adding additional Art Attach additional sheets, if necessary),	(Be specific)				
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an amendment provides for an exch	ange, reclassificat	ion, or cancella	tion of issued s	shares,	
rovisions for implementing the amer (if not applicable, indicate N/A)	adment if not cont	ained in the an	<u>iendment itsel</u>	<u>f:</u>	
(g not apparaist; materiae (t/A)					
					
				-	

The date of each amendment(s) addate this document was signed.	loption:	if other than th
· ·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this bl document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will no partment of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adoption was not required.	pted by the incorporators, or board of directors without shareholder action and sha	rcholder
The amendment(s) was/were adop by the shareholders was/were sur	pted by the shareholders. The number of votes east for the amendment(s) Ticient for approval.	
The amendment(s) was/were appromust be separately provided for a	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
06/06/2022 Dated		
Signature	ector, president or other officer – if directors or officers have not been	
selected,	by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
A	NTOINETTE REYES	
	(Typed or printed name of person signing)	
P	RESIDENT	
_	(Title of person signing)	_