## P22000065006

(Red	questor's Name)
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(City	y/State/Zip/Phone #)
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☐ PICK-UP	☐ WAIT ☐ MAIL
(Bus	siness Entity Name)
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Special Instructions to F	Filing Officer:
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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	INC	
DOCUMENT NUM	BER: P22000065006		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	SHIRLEY SILVA		
		Name of Contact Persor	1
	TAX & ACCOUNTING SOI	LUTIONS FIRM, INC	
		Firm/ Company	
	10100 W SAMPLE ROAD #	330	
		Address	
	CORAL SPRINGS, FL 3306	5	
		City/ State and Zip Code	2
	SHIRLEY@TAXACCOUNT	TINGSOLUTIONSFIRM.C	СОМ
	E-mail address: (to be us	sed for future annual report	notification)
Pau Conthau in formatio	on concerning this matter, plea	va call:	
ror luttner informatic	on concerning this matter, piea	se can.	
MARCEL OLIVEIRA		at (305	) 9885405 dc & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations b. Box 6327 lahassee, FL 32314	Amend Division The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

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INFUSE TATTOO INC	
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P22000065006	
(Document Numbe	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
N/A	The new
name must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co"." "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word
•	N/A
B. Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS)	
5 P. ( 11 16 17 11	·
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
· · · · · · · · · · · · · · · · · · ·	
<ol> <li>If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr</li> </ol>	
Name of New Registered Agent	
N/A	
-	i street address)
N. D. Co. LOW. Allows	. Florida
New Registered Office Address:	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age hereby accept the appointment as registered agent. I am familia	ent:
nereby accept the appointment as registered agent. I am familia	ar with and accept the obligations of the position.
Signature of Nev	w 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)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	MARY MOLINA F DE OLIVEIRA	3713 ASPERWOOD CIRCLE
X Add			COCONUT CREEK, FL 33073
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additi	or adding additional onal sheets, if necessor	iry). (Be specific)				
N/A						
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r. <u>It an amendi</u> provisions f	ment provides for an or implementing the	exchange, reclassive amendment if not	contained in the	<u>nation of issued :</u> amendment itsel	snares, f:	
(if not a	pplicable, indicate Ni	A)			<del></del>	
N/A						
						-
	<u></u>			<u> </u>		

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The date of each amendment(s) a	10/24/2022 <b>doption:</b>	, if other than the
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 b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date w partment of State's records.	ill not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder action an	id shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement 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	
by	(voting group)	
	(voting group)	
10/24/2022 Dated	, <del></del>	
Signature		
(By a di selected	rector, president or other officer = if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	
	MARCEL FERNANDO DE OLIVEIRA	
-	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of person signing)	