P24000047910

(Requestor's Name)
(Address)
(Address)
(1001000)
(City/State/Zip/Phone #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: OSOS TATTOO C	ORP			
DOCUMENT NUMB	ER: P24000047910				
	of Amendment and fee are sul	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	GINO P BALMACEDA				
-		Name of Contact Persor	1		
	OSOS TATTOO CORP				
		Firm/ Company			
	580 E OSCEOLA PKWY				
		Address			
	KISSIMMEE FLORIDA 34744				
		City/ State and Zip Code	2		
	multiservicesw@aol.com				
	-	sed for future annual report	notification)		
E. Calada Camada		aa aall			
For further information	n concerning this matter, pleas	se can:			
GINO P BALMACEE)A	at (<u>347</u>	339-1315		
Name of Contact Person		at (347) 339-1315 Area Code & Daytime Telephone Number			
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:		
S35 Filing Fee	☐S43.75 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address 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

(Name of Corporation as currently P24000047910	v filed with the Florida Dept. of State)			
P24000047910				
	(Document Number of Corporation (if known): Crist			
(Document Number of	f Corporation (if known) Core 7: 00			
Pursuant to the provisions of section 607.1006, Florida Statutes, this atts Articles of Incorporation:	Florida Profit Corporation adopts the dello satisfamendment(s) t			
A. If amending name, enter the new name of the corporation:				
N/A	The new			
name must be distinguishable and contain the word "corporation." "C"." inc.," or Co.," or the designation "Corp." "Inc," or "Co". A "chartered." "professional association." or the abbreviation "P.A."	company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word			
B. Enter new principal office address, if applicable:	580 E. OSCEOLA PKWY			
(Principal office address MUST BE A STREET ADDRESS)	KISSIMMEE FLORIDA 34744			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	580 E. OSCEOLA PKWY			
	KISSIMMEE FLORIDA 34744			
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the			
new registered agent and/or the new registered office address				
Name of New Registered Agent GINO P BALMACEDA	_			
580 E. OSCEOLA PKWY				
(Florida str	reet address)			
New Registered Office Address: KISSIMMEE	, Florida 34744			
New Registered Office Address.	(City) (Zip Code)			
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	t: with and accept the obligations of the position.			

Signature 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.

	g additional Articles, e ts, if necessary). (Be s	specific)		
NONE				
				
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	vides for an exchange	. reclassification, or canc	ellation of issued share	s,
F. If an amendment pro	menting the amendme	ent if not contained in the	amendment itself:	_
provisions for imple				
provisions for imple (if not applicable	e, indicate N/A)			
provisions for imple (if not applicable	e, indicate N/A)			
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provisions for imple (if not applicable	e, indicate N/A)			
F. If an amendment pro provisions for imple (if not applicable NONE	e, indicate N/A)			

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	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
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			
Add			
Remove			
6) Change			
Add			
Damoua			

The date of each amendment(s) ac	loption:	, 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 requirement partment of State's records.	ts, this date will not be listed as the
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 shareh	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the and ficient for approval.	nendment(s)
☐ The amendment(s) was/were appropriately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	ng statement nt(s):
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/17/2024		
Dated	· - 1	
8:	(13-14)	
Signature (By a d	irector, president or other officer – if directors or officers have	not been
	d, by an incorporator - if in the hands of a receiver, trustee, or	other court
appoin	ted fiduciary by that fiduciary)	
	GINO P BALMACEDA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	