

P98000040354

ROBINSON ACCOUNTING SERVICE

2335 E. Baldwin Road
Panama City, Florida 32405

Tel: (850) 769-7110 - (850) 769-2331
Fax: (850) 769-0269

Michael Robinson
Enrollment To Practice
Before The
Internal Revenue Service

W. Ralph Robinson
Enrollment to Practice
Before The
Internal Revenue Service

October 22, 1998

Louise Flemming-Jackson
Corporate Specialist Supervisor
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: Letter Number 598A00050909

100002673471--4
-10/27/98--01001--010
*****35.00 *****35.00

Enclosed is check number 1889 in the amount of \$35.00 as payment for filing the articles of amendment for Gulf Coast Professional Tattoo, Inc. If there are any questions I may be contacted at the above address and number.

Thank you for your help in this matter.

Sincerely,

Michael Robinson, E. A.

FILED
98 OCT 26 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Mr. Robinson authorized
to correct current name*

*Name Change
LFT 10-27-98*

Requestor's Name

Address

Gulf Coast Professional Tattoo, Inc.
10442 Front Beach Road
Panama City Beach, FL 32407

Office Use Only

COLLUSION NUMBER(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

~~*1055, 1092, 1071, 767*~~



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 14, 1998

GULF COAST PROFESSIONAL TATOO, INC.
10442 Front Beach Road
Panama City Beach, FL 32407

SUBJECT: GULF COAST PROFESSIONAL TATOO, INC.
Ref. Number: P98000040354

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 foreach additional page, not to exceed \$52.50.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

If you have any questions concerning this matter, please either respond in writing or call (850) 487-6910.

Louise Flemming-Jackson
Corporate Specialist Supervisor

Letter Number: 598A00050909

**ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF**

FILED
98 OCT 26 AM 11:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GULF COAST PROFESSIONAL TATTOO, INC.

(present name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: *(indicate article number(s) being amended, added or deleted)*

Article I - NAME. Name of corporation is amended to read
GULF COAST PROFESSIONAL TATTOO, INC.

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: 9/28/98

FOURTH: Adoption of Amendment(s) (check one)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups.

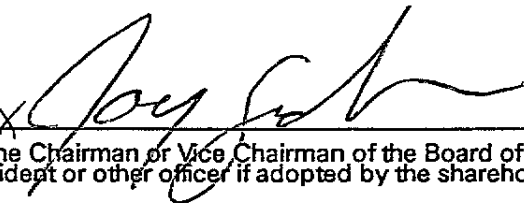
The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____."
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

(continued)

Signed this 28th day of September, 19 98.

Signature 
(By the Chairman or Vice Chairman of the Board of Directors,
President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

Joey R. Spindler

Typed or printed name

Vice President

Title