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SEGRETARY OF STATE DIVISION OF CORPORATION

JUN - 7 2017

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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORATION: Blue Devil Tattoo C	Corp.	·			
DOCUMENT NUMBER: P98000083677					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this mat	ter to the following:				
Mr. Robert Feierstadt					
	Name of Contact Persor	<u> </u>			
Blue Devil Tattoo Corp.					
	Firm/ Company				
14500 SW 21st St.					
Address					
Davie, FL. 33325					
	City/ State and Zip Code				
Bobby@bluedeviltattoo.com					
	ed for future annual report	notification)			
	•				
For further information concerning this matter, pleas	e call:				
Mr. Robert Feierstadt	at (214-5866			
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	\$43.75 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	Street Address Amendment Section Division of Corporations Clifton Building				

Tallahassee, FL 32314

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of

Blue Devil Tattoo Corp.	of Corneration as surrently	filed with the Florida Dept. of State)	
P98000083677	or Corporation as currently	ined with the Piorida Dept. of State	
· · · · · · · · · · · · · · · · · · ·	(Document Number of	Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the following	ng amendment(s) t
A. If amending name, enter the new na	ame of the corporation:		
N/A			_The new
	ation "Corp," "Inc," or "C	," "company," or "incorporated" or the o Co". A professional corporation name must P.A."	
, ,		N/A	
B. Enter new principal office address, (Principal office address MUST BE A S			
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
C. Enter new mailing address, if appli	icable:	N/A	
(Mailing address MAY BE A POST		NA	
D. If amending the registered agent an	ud/ou monintound office addu	one in Playida, antau the name of the	_
new registered agent and/or the ner			•
Name of New Registered Agent	N/A		•
			. 1
	(Florida stre	et address)	_
New Registered Office Address:		. Florida	
New Registered Office Nutress.	(Code)
			4 <u>V</u> S
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.			3 95.
		. 5 , 1	- 64.
			TO ROOM
	Signature of Nov. D.	rgistered Agent, if changing	
	signature of New Ke	gistereu Agent, ij chunging	N BH
			హే

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 De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith .	
Type of Action (Check One)	Title		Name	Address
1) Change	P	_	Annette Quintana	501 Palm Ave
X Add				4th Floor
Remove				Hialeah, FL. 33101
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				·····
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
N/A			
F. 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: (if not applicable, indicate N/A) Robert Feierstadt 50% shares			
Annette Quintana 50% shares			

The date of each amendment(s) a	5/26/201 / doption:	, 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 I document's effective date on the De	plock does not meet the applicable statutory filing requirements, this date with epartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were addraction was not required.	opted by the incorporators without shareholder action and shareholder	
5/26/2017 Dated Signature		
	lirector, 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)	
	Mr. Robert Feierstadt	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	