## V58829

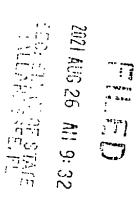
(Rec	questor's Name)	
(Add	lress)	
(Add	tress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	;

Office Use Only



900371620979

08/28/21--01014--001 \*\*35.00



A. Butler 917121

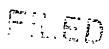
## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Tattoos Forever, In	<b>c</b> .		
DOCUMENT NUM				
The enclosed Articles	s of Amendment and see are su	bmitted for filing.		
Please return all corre	espondence concerning this ma	tter to the following:		
	Jeffrey B bullard			
		Name of Contact Person		
	Tattoos Forever, Inc.			
		Firm/ Сопралу		
	209 Kelly Ave NE	,		
		Address		
	Fort Walton Beach, Florida	32548		
		City/ State and Zip Code		
	jbbullard@gmail.com			
		ed for future annual report	notification)	
For further information	on concerning this matter, pleas		. 865 <del>-</del> 6452	
	of Contact Person	at (850	)le & Daytime Telephone Number	
-	for the following amount made		,	
<b>\$</b> 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)	
Mailing Address		Street Address		
	rendment Section rision of Corporations	Amendment Section Division of Corporations		
	). Box 6327	The Centre of Tallahassee		
Tallahucese ET 37314		2415 N. Monroe Street Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



l'attoos Forever, Inc.		ee,	7021 the or to	
(Name o	of Corporation as current	y filed with the Florida Dep	L'of State) 26 /11 9: 32	
V58829				
,	(Document Number o	f Corporation (if known)	SCORE LANGUES OF STATE	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation a	dopts the following amendment	
A. If amending name, enter the new na	ame of the corporation:			
			The new	
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	A professional corporation n		
B. Enter new principal office address,	if annlicable:	209 Kelly Ave. NE		
(Principal office address MUST BE A S	<del></del>	Fort Walton Beach, Florida 32548		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		209 Kelly Ave NE		
		Fort Walton Beach, Florida	1 32548	
D. If amending the registered agent an new registered agent and/or the new			me of the	
Name of New Registered Agent	Jeffrey B Bullard	_		
	209 Kelly Ave. NE			
	(Florida str	eet address)	***	
New Projectanad Office Address	Fort Walton Beach		, Florida	
New Registered Office Address:		(City)	(Zip Code)	
New Registered Agent's Signature, if c	benoina Vecietured Acente	_		
I hereby accept the appointment as regist			s of the position.	
	)-B(1	3		
<del>-                                    </del>	Signature of New B	Pegistered 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, address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

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 = (Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office) 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. Then 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 Challe Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Crystal Leann Bullard	291 Beachview Drive NE
Add			Fort Walton Beach, Florida 32547
X Remove			
2) Change	P	Jeffrey B Bullard	209 Kelly Ave. NE
X Add			Fort Walton Beach, Florida 32548
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6)Change			
Add			
Remove			

	ts, if necessary). (Be	specific)				
	<u> </u>			·····		_
				<u> </u>		_ <del></del>
	_ ·· -	-				
				<u> </u>		
		<del></del>	·			
					<b></b> .	-
<del></del>						
					<del> </del>	<del></del>
	<u> </u>	-				
		<u>-</u>		- ·		-
				<u> </u>		•
<u> </u>			<del></del>	<u> </u>	<del></del>	
		I:G4i-		tion of irrenad	l chares	
		t, rectassificatio	a, or cauceus	CION OF 172 REC	. Suai Co.	
an amendment pro	menting the amendm	ent if not contai	ned in the an	endment itse	<b>-11:</b>	
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its	<u>aı:</u>	
an amendment pro- provisions for imples (if not applicable)	menting the amendm	ent if not contai	ined in the an	<u>sendment its</u>	<del>211:</del>	
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its	<u>.</u> .	-
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its	<u>.</u> .	-
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its		-
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its		-
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its	·	-
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its		-
an amendment proprovisions for imple (if not applicable	menting the amendm	ent if not contai	ned in the an	endment its		-
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its		_
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its		-
provisions for imple	menting the amendm	ent if not contai	ned in the an	endment its		-

The date of each amendmen	t(s) adoption:	, if other than
date this document was signed		
Effective date if applicable:	08/23/2021	
Effective date is apparable.	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this the Department of State's records.	s date will not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/we action was not required.	are adopted by the incorporators, or board of directors without shareholder	action and shareholder
	re adopted by the shareholders. The number of votes east for the amendm were sufficient for approval.	cnt(s)
	ere approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s):	tement
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
08/23	/2021	
Dated		
Signature	OBB (	
	By a director, president or other officer - if directors or officers have not be	een
	elected, by an incorporator - if in the hands of a receiver, trustee, or other	court
a	ppointed fiduciary by that fiduciary)	
	Jeffrey B Bullard	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	