Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone : (850)222-1092

Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

C.E.

COR AMND/RESTATE/CORRECT OR O/D RESIGN CLASS 1, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 1 |
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Corporate Filing Menu

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'JAN 2 8 2014'

1/27/2014

COVER LETTER

| TO: | Amendment Section Division of Corporations | | | | | |
|-----------------------|--|--|--|--|--|--|
| SUBJ | Class 1, Inc. | | | | | |
| OQ DO | Namo | of Corporation | | | | |
| DOC | DOCUMENT NUMBER: F0100000709 | | | | | |
| The c | nclosed Amendment and fee are subn | nitted for filing. | | | | |
| Please | e return all correspondence concerniu | g this matter to the following: | | | | |
| | Name of Contact Person | | | | | |
| | Firm/Company | —————————————————————————————————————— | | | | |
| | Address | · | | | | |
| | City/State and Zip Code | | | | | |
| dp | erl@ldexcorp.com | | | | | |
| | E-mail address: (to be used for future and | ual report notification) | | | | |
| For fi | urther information concerning this ma | tter, please call: | | | | |
| <u>Ve</u> | rnell Lloyd, Paralega | al at 847- 664-4750 Area Code & Daytime Telephone Number | | | | |
| Bnclo | osed is a check for the following amou | nnt: | | | | |
| | \$35.00 Filing Fee S43.75 Filing Fee Certificate of State | | | | | |
| Amer Divis P.O. | ing Address: adment Section tion of Corporations Box 6327 hassee, FL 32314 | Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | | |

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

| F0100000709 | | \$ |
|---|--|---------------------|
| (Document num | ber of corporation (if known) | |
| Class 1, Inc. | | \sim |
| | ars on the records of the Department of State) | |
| | | AH III O |
| | 3. 02/02/2001 (Date authorized to do business in Florida) | |
| (Incorporated under laws of) | (Date authorized to do business in Florida) | 0 |
| - | SECTION II Ly the applicable changes) | |
| . If the amendment changes the name of the corpora its jurisdiction of incorporation? 12/31/2013 | ntion, when was the change effected under the laws of | • |
| Hale Products, Inc. | | |
| (Name of corporation after the amendment, adding appropriate abbreviation, if not contained in new | g suffix "corporation," "company," or "incorporated," name of the corporation) | or |
| (If new name is unavailable in Florida, enter altern business in Florida) | nate corporate name adopted for the purpose of transac | ting |
| . If the amendment changes the period of duration, | indicate new period of duration. | |
| | (New duration) | |
| . If the amendment changes the jurisdiction of income | rporation, indicate new jurisdiction. | |
| (N | New jurisdiction) | |
| Attached is a certificate or document of similar im 90 days prior to delivery of the application to the I having custody of corporate records in the jurisdic | nport, evidencing the amendment, authenticated not m Department of State, by the Secretary of State or other ction under the laws of which it is incorporated. | ore that officia |
| Chal | | |
| (Signature of a director, president or other officer - i of a receiver or other court appointed fiduciary, by | is in the initias that fiduciary) | |
| Craig T. Boyd | Vice President | |
| (Typed or printed name of person signing) | (Title of person signing) | |

Delaware

DAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBY CERTIFY THAT THE SAID "CLASS 1, INC.", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "HALE PRODUCTS, INC.", THE TENTH DAY OF DECEMBER, A.D. 2013, AT 5:16 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE EFFECTIVE DATE OF THE AFORESAID CERTIFICATE OF AMENDMENT IS THE THIRTY-FIRST DAY OF DECEMBER, A.D. 2013, AT 11:59 O'CLOCK P.M.

3336074 8320

140090363

You may vorify this cortificate online at corp.dalaware.gov/authvar.shtml

Jeffrey W. Bullock, Secretary of State

Jenrey W. Bullock, Secretary of the TORASET

DATE: 01-24-14