

F15000001006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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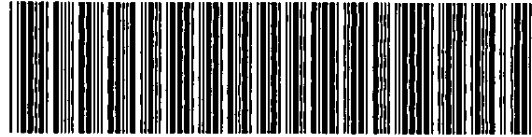
(Business Entity Name)

(Document Number)

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4-14-15



**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Classic Capital, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** F15000001006

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Noel P. Godureau

Name of Contact Person

Kubasiak Fylstra Thorpe & Rotunno PC

Firm/Company

20 S. Clark Street, Suite 2900

Address

Chicago, IL 60603

City/State and Zip Code

ngoudreau@kftirlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Noel Goudreau

Name of Contact Person

at ( 312 ) 630-9600

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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TALLAHASSEE FL 32301  
STATE



**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Classic Capital, Inc.
2. The principal office address: 1350 Main Street, Unit 1310, Sarasota, FL 34236
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: March 11, 2015 Document number: F15000001006
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jay Leonard

1350 Main Street, Unit 1310

Sarasota, FL 34236

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

1343 Main Street, Suite 305

P.O. Box NOT acceptable

Sarasota, FL 34236

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Jay Leonard  
Signature of an officer or director

Jay Leonard, President

Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

\_\_\_\_\_  
Signature of Registered Agent

\_\_\_\_\_  
Date

If signing on behalf of an entity: \_\_\_\_\_

\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (03/12)

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15 APR 13 AM 5:09  
SEC. OF STATE  
TALLAHASSEE, FLORIDA