P04000047380

| (Requestor's Name) | |
|---|---|
| (Address) | |
| (Address) | |
| (was say | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | _ |
| Special Instructions to Filing Officer. | |
| | |
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Office Use Only

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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

| SUBJECT: | rame C | lass | Inc. | | |
|-------------------------|--|----------------|--|-------------------------|--|
| DOCUMENT NUM | ber: <u>_</u> <u>P040</u> | 00047 | 380 | - | |
| The enclosed Articles | of Amendment at | nd fee are su | ibmitted for filing. | | |
| Please return all corre | spondence concert | ning this ma | tter to the following | g: | |
| | Rene | (Name o | 5.5 f Person) | | |
| | Frame | Clas | S Inc. | · | |
| | 2351 | E. J | tinson A | ve # | = 10 |
| | Haines | City/ State/ a | FL. | 33844 | <u>!</u> |
| For further information | on concerning this | natter, plea | se call: | • | |
| _Rene (| Class Name of Person) | | at (<u>\$63</u>)_ (Area Code & | 557-8 Daytime Teleph | 837 one Number) |
| Enclosed is a check for | or the following am | ount: | | | |
| □ \$35 Filing Fee | S43.75 Filing Fee Certificate of State | | Certified Copy (Additional copy is enclosed) | | \$52.50 Filing Fee Certificate of Statu Certified Copy (Additional Copy is enclosed) |
| Mailing Addr | ress | | Street Address | | is cheivacu) |

Amendment Section

Division of Corporations 409 E. Gaines Street

Tallahassee, FL 32399

Articles of Amendment to Articles of Incorporation of

| | OI. |
|----------------|--|
| | - Frame Class Inc. |
| | (Name of corporation as currently filed with the Florida Dept. of State) |
| | ONIMONOUTOND ARE N |
| | P6400047380 (Document number of corporation (if known) |
| Ţ | Oncument number of corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation |
| | dopts the following amendment(s) to its Articles of Incorporation: |
| Towns. | NEW CORPORATE NAME (if changing): |
| _ | Same |
| - | (must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") |
| _ | MENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) nd/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) |
|) (| add: The Following: |
| ē | dd: Titleg officer |
| đ | H: name & JACKSE Alvarado |
| | address: 1124- HWY 17-92-N# A-1 |
| _ | DevenPort, Il 33837 |
| - ح ک | adi The Following: |
| -1 | itles Officer |
| _ | |
| | anci Gustavo Peña Loza |
| <u>C</u> | odress: 1124 - Huy 17-92 n # A-1 Doup. FZ. 33837 |
| Ø d H fe | (Attach additional pages if necessary) (Attac |
| | |
| _ | |

(continued)

| The date of each amendment(s) adoption: 5/18/04 |
|---|
| Effective date if applicable: (no more than 90 days after amendment file date) |
| (the more mail to days after anteriorism me anter |
| Adoption of Amendment(s) (CHECK ONE) |
| The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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. |
| Signed this |
| Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| Rene (lass (Typed or printed name of person signing) |
| CFF (Cer (Title of person signing) |

FILING FEE: \$35