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MAR 3 1 2014 T. CARTER

## **COYER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Motor City Classics and Customs DOCUMENT NUMBER: P14000008104 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kim Reynolds Name of Contact Person Motor City Classics and Customs Firm/ Company 6587 HWY 21 #3 Keystone Heights, FI 32656 City/ State and Zip Code kim@motorcityclassicsandcustoms.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kim Reynolds Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filling Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment** Articles of Incorporation

FILED SECRETARY OF STATE TALLAMA SSEE, FLORIDA

14 HAR 26 PH 4: 01

## Motor City Classics and Customs, Inc.

(Name of Corporation as currently filed with the Florida Dept, of State) P14000008104

(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 1006, Flor its Articles of Incorporation:	rida Statutes <sub>,</sub> this <i>Florida Prof</i>	fit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Cow word "chartered," "professional association," or t	orp," "Inc," or "Co". A pro	ny," or "incorporated" or the a fessional corporation name must	_The new bbreviation contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	ble: DDRESS)		<del>-</del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>BOX</i> )		- -
D. If amending the registered agent and/or registered agent and/or the new register	stered office address in Florided office address:	da, enter the name of the	-
Name of New Registered Agent			
PPPENDON AND ADDRESS AND ADDRE	(Florida street address)		
New Registered Office Address:	,	, Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing F I hereby accept the appointment as registered agen		ept the obligations of the position.	

Signature of New Registered Agent, if changing

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 Doe	
X Remove	<u>¥</u>	Mike Jones	
X Add	= <u>sv</u>	Salty Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VD	Joshua Brown	8183 Easement Rd.
Add			Melrose, FI 32666
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			ARRAS IN LANGUAGE
Remove			
4) Change			
Add	<u></u>		
Remove			
. 🗀			
5) Change			,,, ,, es.
Add			
Remove			4-4-1974;
6) Change			
Add			
Remove			

	lditional sheets, if ne	ecessary). (Be speci	fic)		
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an am	endment provides fo	or an exchange, recls	assification, or cance	llation of issued shar	es,
atte Gill	ns for implementing	g the amendment if i	not contained in the	amendment itself:	
<u>provisio</u>	. 4	ite N/A)			
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
I he 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.	
Dated 3/20/2014 3/24/2014 and	
Dated 3/29/2014 3/24/2014 and Signature Mules Rusin III  (By a directory 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)	
Myles Rusin III	
(Typed or printed name of person signing)	
PSTD	
(Title of person signing)	