P14000063388

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
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11/07/14--01025--009 **35.00



10/2

COVER LETTER

TO:	Amendment Section	
	Division of Corporation	5

NAME OF CORPORATION: National Muscle Cars, Inc. DOCUMENT NUMBER: P14000063388				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all corresp	ondence concerning this mat	ter to the following:		
-	Thomas Soricel	li	·	
_		Name of Contact Person		
_		Firm/ Company		
378 Maya St				
<u>-</u>	<u>•</u> .	Address		
1	Lake Mary - FL	- 32746		
<u>-</u>	-and mary 12	City/ State and Zip Code		
		City/ State and Zip Code	•	
thor	mas@cflacc.cor	n		
		ed for future annual report	notification)	
For further information concerning this matter, please call:				
Thomas Sori	icelli	at (407	₎ 4941570	
Name of	Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Amen Divisi P.O. I	ng Address dment Section ion of Corporations Box 6327	Amend Divisio Clifton	Address ment Section n of Corporations Building	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

FILED

National Muscle Cars, Inc.	2814 NOV - T	PM 1: 05	
(Name of Corporation as currently filed with the Florida Dep	t. of State)		_
P14000063388	TÄLLÄHASS	EE. FLORID	A.
(Document Number of Corporation (if known)	10		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Protes</i> Articles of Incorporation:	ofit Corporation add	opts the following	ng amendment(s
A. If amending name, enter the new name of the corporation:			
Central Florida Classic Cars Inc.			The new
name must be distinguishable and contain the word "corporation," "compo "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A provord "chartered," "professional association," or the abbreviation "P.A."			
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS		·	
			- -
C. Enter new mailing address, Kapplicable: (Mailing address MAY BE A POST OFFICE BOX)		· · · · · · · · · · · · · · · · · · ·	-
			-
 If amending the registered agent and/or registered office address in Flor new registered agent and/or the new registered office address: 	ida, enter the nam	e of the	
Name of New Registered Agent			
(Florida street address)			
New Registered Office Address: (City)	, Florida_	(Zip Code)	_
New Designationed Agent's Signature if shanging Designated Agents			
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the appointment as registered agent.	cept the obligations	of the position.	
Signature of New Registered Agent, if cha	inging		

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	RT John Doe	
X Remove	<u>∨</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name	Address
1) Change		
Add Remove		
2) Change		
Add Remove		
3) Change		
Add		
Remove		····
4) Change		
Remove		
5) Change		
Add		-100
Remove		
6) L Change		\
Add Remove		
	Page 2 of 4	\

f amending or adding additional Artl Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
``	(F3)
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(J. 11)	
	\
	\
	\

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
-		
Effective date if applicable:	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_11/04/20	014	
Signature		
• •	rector, president or other officer - if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
арропа	od nadeliny by that nadeliny,	
	Thomas R Soricelli	
•	(Typed or printed name of person signing)	
	President	
•	(Title of person signing)	_