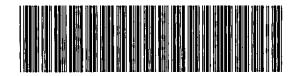
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| PICK-UP                 | ☐ WAIT             | MAIL        |  |  |
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| Certified Copies        | _ Certificates     | s of Status |  |  |
| Special Instructions to | Filing Officer:    |             |  |  |
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Office Use Only



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Amend

APR 04 2016 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: STANDARD CLA  | ASSICS CO. INC   |  |
|--|--|--|
| DOCUMENT NUMBER: P16000023058  |  |  |
| The enclosed Articles of Amendment and fee are su  | bmitted for filing.  |  |
| Please return all correspondence concerning this ma  | tter to the following:   |  |
| NELSON M FIGUEREDO   |  |  |
|  | Name of Contact Perso  | on .   |
| STANDARD CLASSICS CO   |  | <b>,</b>   |
|  | Firm/ Company  |  |
| 1581 WEST 49 STREET UN   | , ,  |  |
|  | Address  |  |
| HIALEAH, FLORIDA 33012   | 2  |  |
|  | City/ State and Zip Cod  | de   |
| STANDARDCLASSICSCO@GM.   | AIL.COM  |  |
| <del>-</del>   | ed for future annual repor   | t notification)  |
|  |  | · · · · · · · · · · · · · · · · · · ·  |
| For further information concerning this matter, pleas  | e call:  |  |
| NELSON M FIGUEREDO   | 707  | 280 2526   |
| Name of Contact Person   | at (   | ode & Daytime Telephone Number   |
| Name of Contact Person   | Area Ci  | ode & Daytime Telephone Number   |
| Enclosed is a check for the following amount made p  | payable to the Florida Dep   | eartment of State:   |
| \$35 Filing Fee \$\times \text{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) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Amen<br>Divisi<br>Cliftor  | Address dment Section on of Corporations n Building Executive Center Circle            |

Tallahassee, FL 32301

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

|   | Amendment  |
|---|--|
|   | Amendment to Incorporation of Including the Florida Dept. of State |
|   | of 4/504 78  |
| STANDARD CLASSICS CO, INC   | Phy  |
|   | ntly filed with the Florida Dept. of State)                        |
| 216000023058  | <u> </u>   |
| (Document Number  | of Corporation (if known)  |
| fursuant to the provisions of section 607.1006, Florida Statutes, the s Articles of Incorporation:  | is Florida Profit Corporation adopts the following amendment(s)    |
| . If amending name, enter the new name of the corporation:  | The  |
| ame must be distinguishable and contain the word "corporat<br>Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or<br>ord "chartered," "professional association." or the abbreviation | "Co". A professional corporation name must contain the             |
| . Enter new principal office address, if applicable:<br>Principal office address <u>MUST BE A STREET ADDRESS</u> )  | 1581 WEST 49 STREET  |
|   | UNIT 301   |
|   | HIALEAH, FLORIDA 33012   |
| E. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)   | 1581 WEST 49 STREET  |
|   | UNIT 301   |
|   | HIALEAH, FLORIDA 33012   |
| ). If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre   |  |
| Name of New Registered Agent NA   |  |
| (Florida :  | street address)  |
| 1. 1.   |  |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept 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 fin Add.

| Example: X Change             | <u>PT</u>    | John Doe    |             |                 |
|-------------------------------|--------------|-------------|-------------|-----------------|
| X Remove                      | <u>V</u>     | Mike Jones  |             |                 |
| <u>X</u> Add                  | <u>sv</u>    | Sally Smith |             |                 |
| Type of Action<br>(Check One) | <u>Title</u> | <u>N</u> an | <u>e</u>    | <u>Addres</u> s |
| 1) Change                     |              | _           |             |                 |
| Add                           |              |             |             |                 |
| Remove                        |              |             |             |                 |
| 2) Change                     |              |             |             | \               |
| Add                           |              |             |             |                 |
| Remove                        |              |             | $\setminus$ |                 |
| 3) Change                     |              |             |             |                 |
| Add                           |              |             |             | \               |
| Remove                        |              |             |             |                 |
| 4)Change                      |              | λ _         |             |                 |
| · Add                         |              |             | \           |                 |
| Remove                        |              |             |             |                 |
| 5) Change                     |              |             |             |                 |
| Add                           |              |             |             |                 |
| Remove                        |              |             |             |                 |
| 6) Change                     |              |             |             |                 |
| Add                           |              |             |             |                 |
| Remove                        |              |             |             |                 |

|  | (Be specific)                         |  |   |
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| an amendment provides for an exch<br>provisions for implementing the amer                                  | ange, reclassific                     | ation, or cancellation of issued shares,                                     |   |
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| orovisions for implementing the amer<br>(if not applicable, indicate N/A)                                  | <u>ıdme</u> nt if not <u>co</u>       | ntion, or cancellation of issued shares, named in the amendment itself:      |   |
| orovisions for implementing the amer<br>(if not applicable, indicate N/A)                                  | <u>ıdme</u> nt if not <u>co</u>       | ntion, or cancellation of issued shares,<br>ntained in the amendment itself: |   |
| orovisions for implementing the amer<br>(if not applicable, indicate N/A)                                  | <u>ıdme</u> nt if not <u>co</u>       | ntion, or cancellation of issued shares, natained in the amendment itself:   |   |
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| The date of each amendment(s) adoption:  | , if other than the       |
|--|---------------------------|
| date this document was signed.   |                           |
| 03/22/2016  Effective date if applicable:  |                           |
| (no more than 90 days after amendment file date)   |                           |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.                         | vill not be listed as the |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |                           |
| 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.   |                           |
| 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.   |                           |
| Dated_Morch 22, 2016 Signature/MA AZ   |                           |
| (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)   |                           |
| NELSON M FIGUEREDO   |                           |
| (Typed or printed name of person signing)  |                           |
| TRESIDENT  |                           |
| (Title of person signing)  |                           |