P94000071470

577 Deltona Blvd., Suite #9 Deltona, Florida 32725 May 30, 1997

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

100002211571--0 -06/13/97--01056--013 *****35.00 *****35.00

RE: CLASSIC CUTS OF CENTRAL FLORIDA, INC.

Gentlemen:

Enclosed please find an original and one (1) copy of the Articles of Amendment to Articles of Incorporation for the above-referenced corporation, and a check in the amount of THIRTY-FIVE DOLLARS AND NO CENTS (\$35.00).

Sincerely yours,

Maureen A. Tola

MAT/gnm

Enclosures - Articles of Amendment to Articles of Incorporation (original + copy)

- Check

38

2(11(97)

P94000071470

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 23, 1997

MAUREEN A. TOLA 577 DELTONA BLVD., SUITE #9 DELTONA, FL 32725

SUBJECT: CLASSIC CUTS OF CENTRAL FLORIDA, INC.

Ref. Number: P94000071470

We have received your document for CLASSIC CUTS OF CENTRAL FLORIDA, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

MUST LIST THE ADDRESS FOR ALL NEW OFFICERS AND DIRECTORS.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6052.

Vickie Whitfield Corporate Specialist

Letter Number: 197A00033313

(574.753)

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION CLASSIC CUTS OF CENTRAL FLORIDA, INC.

Pursuant to the provisions of Chapter 6 7.1006, Florida Statutes, the undersigned corporation adopts the following Articles of Amendment to its Articles of Incorporation, filed September 28, 1994, #P94000071470.

FIRST: Amendments adopted:

(a) Change in names of the shareholders from Tamar L. Darr and William R. Darr to MAUREEN A. TOLA and CARLOS A. TOLA.

(b) Change in names and titles of officers of the corporation:

From: Tamar L. Darr - President and Secretary

William R. Darr - Vice-President and Treasurer

To: MAUREEN A. TOLA - President and Secretary CARLOS A. TOLA - Vice-President and Treasurer

(c) Change in Shares of Capitol Stock of this corporation to be

issued:

From: Tamar L. Darr 51 shares William R. Darr 49 shares

To: MAUREEN A. TOLA 51 Shares CARLOS A. TOLA 49 shares

(d) Change in name of the resident agent from William R. Darr to

CARLOS A. TOLA.

SECOND: The amendments were adopted by the Board of Directors

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION CLASSIC CUTS OF CENTRAL FLORIDA, INC. PAGE #2

1997.

DATED: May 30, 1997

CLASSIC CUTS OF CENTRAL-FLORIDA,

INC.

MAUREEN A. TOLA

Typed or printed name

President Title

Attest:

The name and address of the new registered agent and office: (P.O. Box Not Acceptable)	
CARLOS A. TOLA	
577 DELTONA BLVD., SUITE #9	
DELTONA, FLORIDA 32725	
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.	
(Signature of an officer chairman of vice chairman of the board) August 22, 1997 (Date)	
MAUREEN A. TOLA - President (Printed or typed name and title)	
Having been named as registered agent and to accept service of process for the above stated corporal I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree comply with the provisions of all statutes relative to the proper and complete performance of my dutie and I am familiar with and accept the obligation of my position as registered agent.	tion, to es,
(Signature of Registered Agent) August 22 1997 (Date)	
If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	
CR2E045(1/95) FILING FEE: \$35.00	