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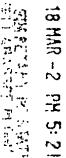
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February 19, 2018

ROY E. FITZGERALD MRACHEK, FITZGERALD, ROSE, KONOPKA, THOM 505 SOUTH FLAGLER DRIVE SUITE 600 WEST PALM BEACH, FL 33401

SUBJECT: 3D CLASSICS, INC. Ref. Number: P95000023739

We have received your document 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):

The current name of the entity is as referenced above. Please correct your document accordingly.

THE DOCUMENT YOU HAVE SUBMITTED IS REFERENCED SPECIFICALLY FOR FLORIDA PROFIT BENEFIT OR FLORIDA PROFIT SOCIAL PURPOSE CORPORATIONS.

We are enclosing the proper form(s) with instructions for your convenience.

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 (850) 245-6050.

Letter Number: 818A00003442

Susan Tallent Regulatory Specialist II

www.sunbiz.org

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COVER LETTER

TO: Amendment Se Division of Co					
NAME OF CORP	ORATION: 3-D Classics, Inc	3 ,			
DOCUMENT NUM	4BER: P95000023739				
The enclosed Article	es of Amendment and fee are s	ubmitted for filing.			
Please return all con	respondence concerning this ma	atter to the following:			
	Roy E. Fitzgerald				
		Name of Contact Perso	n		
	Mrachek, Fitzgerald, Rose, Konopka, Thomas & Weiss, PA				
		Firm/ Company			
	505 South Flagler Drive S	uite 600			
	<u> </u>	Address			
	West Palm Beach, FL 334	01			
		City/ State and Zip Cod	c		
rfitz	gerald@mrachek-law.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
Steven Kairis		561	368-5488		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:		
■ \$35 Filing Fec	☐\$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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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(Name of Corporation as curren	ntly filed with the Florida De	ept. of State)	<u> </u>
P95000023739			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation	adopts the following amendmen	nt(s) to
A. If amending name, enter the new name of the corporation:			
N/A		The new	
name must be distinguishable and contain the word "curporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpo	porated" or the abbreviation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A		
		<u>>i = </u>	
		<u> </u>	
		- 20	F
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	<u> </u>	
	-	7	ED
	······································		
	 -	<u> </u>	
D. If amending the registered agent and/or registered office ad-		<u>ime of the</u>	
new registered agent and/or the new registered office addre		<u>ime of the</u>	
		<u></u>	
new registered agent and/or the new registered office addres		<u></u>	
new registered agent and/or the new registered office address N/A Name of New Registered Agent		<u></u>	
new registered agent and/or the new registered office address N/A Name of New Registered Agent	SS;		

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.

X Change	<u>PΥ</u>	John Doc	
X Remove	v	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
X Change	P. S.	Steve Kairis	875 Meadows Road #311
Add			Boca Raton, FL 33486
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
の Change			
Add			
Remove			

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		nange, reclassifi	eation, or cancell ontained in the si	ation of issued sh	ares,	
an amendment p	rovides for an exclude lementing the ame	indment if not co				
<u>provisions for imp</u>	rovides for an exch dementing the ame ble, indicate N/A)	endment if not e		Tendine III (ACI)		
<u>provisions for imp</u>	<u>lementing the ame</u>	endment if not e		Maria Maria		
<u>provisions for imp</u>	<u>lementing the ame</u>	endment if not e				
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I an amendment p provisions for imp (if not applicat	<u>lementing the ame</u>	endment if not e				

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date	2)
Note: If the date inserted in this block does not meet the applicable statutory filing requiremen document's effective date on the Department of State's records.	its, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amby the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	ng statement nt(s):
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and s action was not required.	hareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharel action was not required.	holder
Dated_3/2/18	
Signature Sur Maurin	
(By a director, president or other officer - if directors or officers have selected, by an incorporator - if in the hands of a receiver, trustee, or cappointed fiduciary by that fiduciary)	
STEVEN KAIRIS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	