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(((H95000006660))) ELECTRONIC FILING COVER SHEET

TO: DIVISION OF CORPORATIONS
DEPARTMENT OF STATE
STATE OF FLORIDA
409 EAST GAINES STREET
TALLAHASSEE, FL 32399
FAX: (904) 922-4000

FROM: EMPIRE CORPORATE KIT COMPANY
1492 W FLAGLER ST
SUITE 200
MIAMI FL 33135- 0-0000
CONTACT: RAY STORMONT
PHONE: (305) 541-3694
FAX: (305) 541-3770

(((H95000006660))) DOCUMENT TYPE: FLORIDA PROFIT CORPORATION OR P.A.
NAME: CLASSIC MANAGEMENT GROUP, INC.
FAX AUDIT NUMBER: H95000006660 CURRENT STATUS: REQUESTED
DATE REQUESTED: 06/14/1995 TIME REQUESTED: 13:23:12
CERTIFIED COPIES: 1 CERTIFICATE OF STATUS: 0
NUMBER OF PAGES: 6 METHOD OF DELIVERY: FAX
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TALLAHASSEE, FLORIDA

6/14

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TOTAL P.06

ARTICLES OF INCORPORATION

OF

CLASSIC MANAGEMENT GROUP, INC.

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TALLAHASSEE, FLORIDA

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ARTICLE I

NAME

The name of this corporation is CLASSIC MANAGEMENT GROUP, INC.

ARTICLE II

NATURE OF BUSINESS

This Corporation may engage in any business activity or business permitted under the laws of The United States and the State of Florida.

ARTICLE III

CAPITAL STOCK

The maximum number of shares of stock that this Corporation is authorized to have outstanding at any one time is SEVEN THOUSAND FIVE HUNDRED (7,500) SHARES of common stock having $1.00 par value.

ARTICLE IV

INITIAL CAPITAL

The amount of capital that this Corporation will begin with is FIVE HUNDRED ($500.00) DOLLARS.

H95000096H

THE TAX MAN, INC.
1801 BELVEDERE RD., SUITE 218-SOUTH
WEST PALM BEACH, FL 33406
684-3844
Jay Fischler

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ARTICLE V

TERM OF EXISTENCE

This Corporation shall have perpetual existence.

ARTICLE VI

INITIAL REGISTERED OFFICE AND AGENT

The address in the State of Florida of the principle office of this Corporation is 1001 Truman Avenue, Key West, Florida, 33040, and the name of the initial registered agent at this address is Tammy Rodriguez.

ARTICLE VII

INITIAL BOARD OF DIRECTORS

The Corporation shall have two (2) directors initially. The number of directors may either be increased or diminished from time to time by the by-laws, but shall never be less than one.

ARTICLE VIII

INITIAL DIRECTORS

Tammy Rodriguez	1001 Truman Ave Key West, Fl 33040
Jose Rodriguez	1001 Truman Ave Key West, Fl 33040

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ARTICLE IX

INCORPORATORS

The name and address of the persons signing these articles of incorporation is:

Tammy Rodriguez	1001 Truman Ave Key West, Fl 33040
Jose Rodriguez	1001 Truman Ave Key West, Fl 33040

IN WITNESS WHEREOF, the undersigned subscribers have executed these articles of incorporation this 13th day of June, 1995.

Tammy Rodriguez

Jose Rodriguez

STATE OF FLORIDA

COUNTY OF MONROE

Before me, a notary public authorized to take acknowledgments in the state and county set forth above, personally appeared Tammy & Jose Rodriguez, known by me to be the person who executed these article of incorporation.

IN WITNESS THEREOF, I have hereunto set my hand and official seal, in the state and county aforesaid, this 13th day of June, 1995.

{SEAL}

ANNETTE S. EVANS
MY COMMISSION # CC 497984
EXPIRES: November 1, 1998
Bonded Thru Notary Public Underwriters

Notary Public

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CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST--CLASSIC MANAGEMENT GROUP, INC.
DESIRES TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA WITH ITS PRINCIPLE PLACE OF BUSINESS AT THE CITY OF KEY WEST, MONROE COUNTY, STATE OF FLORIDA, HAS NAMED TAMMY RODRIGUEZ, AT 1001 TRUMAN AVE CITY OF KEY WEST, STATE OF FLORIDA AS ITS AGENT TO ACCEPT PROCESS WITHIN FLORIDA.

SIGNED _____

TITLE PRESIDENT

DATE JUNE 13, 1995

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN ACCORDANCE WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNED _____
TAMMY RODRIGUEZ
Resident Agent

DATE JUNE 13, 1995

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TALLAHASSEE, FLORIDA

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SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT CORPORATION ANNUAL REPORT
1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 DEC 26 AM 11:09
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P95000046239 (6)**

1. Corporation Name
CLASSIC MANAGEMENT GROUP, INC.

Principal Place of Business	Mailing Address
1001 TRUMAN AVENUE KEY WEST FL 33040	1001 TRUMAN AVENUE KEY WEST FL 33040

2. Principal Place of Business	2a. Mailing Address
21 3210 N. Roosevelt Blvd	26 3210 N. Roosevelt Blvd
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Key West FL	City & State 28 Key West FL
Zip 24 33040 Country 25 Monroe	Zip 29 33040 Country 30 Monroe

3. Date Incorporated or Qualified: 06/14/1995
3a. Date of Last Report: N/A
4. FEI Number: 65-0589321 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
RODRIGUEZ, TAMMY
1001 TRUMAN AVENUE
KEY WEST FL 33040

10. Name and Address of New Registered Agent
81 Name: Tammy Rodriguez
82 Street Address (P.O. Box Number(s) Not Acceptable): 3706 Duck Ave
83
84 City: Keywest FL 85 Zip Code: 33040

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] Tammy Rodriguez 11/20/96
Signature, typed or printed name of individual or incorporated agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RODRIGUEZ, TAMMY 1001 TRUMAN AVE. KEY WEST FL 33040	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	☐ Change ☒ Addition REINSTATEMENT 96 12/20/96
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RODRIGUEZ, JOSE 1001 TRUMAN AVE. KEY WEST FL 33040	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	☐ Change ☐ Addition 300002043393--4 -01/03/97--01022--006 ****375.00 ****375.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] Tammy Rodriguez 11/25/96 305-294-3220

CR2E064 (3/96)