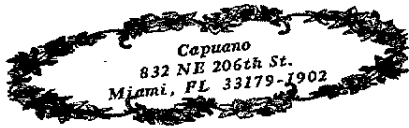


P96000036300

Requestor's Name



Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____ (Corporation Name) _____ (Document #) 200002505202--6
2. _____ (Corporation Name) _____ (Document #) -04/29/98-01062--009
*****35.00 *****35.00
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

| NEW FILINGS | |
|-------------|-------------------|
| | Profit |
| | NonProfit |
| | Limited Liability |
| | Domestication |
| | Other |

| AMENDMENTS | |
|------------|--|
| | Amendment |
| | Resignation of R.A., Officer/ Director |
| | Change of Registered Agent |
| | Dissolution/Withdrawal |
| | Merger |

| OTHER FILINGS | |
|---------------|------------------|
| | Annual Report |
| | Fictitious Name |
| | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| | Foreign |
| | Limited Partnership |
| | Reinstatement |
| | Trademark |
| | Other |

FILED
98 APR 29 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. A. Charge
5-5-98

Examiner's Initials

LFT

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of _____ submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1a. The name of the corporation is: CLASSICS BY CAPU VELLO, INC

1b. The mailing address of the corporation is: 832 NE 206th St

No Miami Beach Fla 33129

1c. Date of incorporation: 4/24/91 Document number: P 96000036300

2. The name and address of the current registered agent and office:

Corporate Access

1116-D Thomasville Road

Mount Vernon Square Tallahassee Fla-323

3. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

ISAAC CAPUANO

832 NE 206th St

Miami B Fla 33129

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.

Isaac Capuano
(Signature of an officer, chairman or
vice chairman of the board)

4/26/98
(Date)

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

Isaac Capuano
(Signature of Registered Agent)

4/26/98
(Date)

If signing on behalf of an entity:

Isaac Capuano
(Typed or Printed Name)

Officer
(Capacity)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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