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Division of Corporations

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FOREIGN PROFIT/NONPROFIT CORPORATION

CONTINENTAL INCORPORATED, INC.

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TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN
ALTERNATE NAME FOR USE IN FLORIDA**

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Karl Manders do hereby certify
(Name)

that this Resolution of the Board of Directors of Continental Incorporated, Inc.
(Name of Corporation)

a corporation duly organized and existing under the laws of Indiana
(State or Country)

was adopted on December 15, 1988, adopting the alternate

name of Continental Enterprises, Inc. of Indiana
(Alternate Name) NOTE: Must contain a corporate suffix)

for use in Florida as its real name is unavailable in Florida.

Date: 11/13/08

[Signature]
Signature of Chairman, Vice Chairman of the Board, a
director or any officer

CEO
Title of person signing

FILING FEE \$35

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Make checks payable to Florida Department of State and mail to:

Division of Corporations
P.O. Box 6327
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CR2E126 (6/08)

Fax Credit #14080007560103

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. CONTINENTAL INCORPORATED, INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

Continental Enterprises, Inc. of Indiana

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Indiana

(State or country under the law of which it is incorporated)

3. 35-1791975

(FEI number, if applicable)

4. 3/5/1990

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6.

(Date first transacted business in Florida. If corporation has not transacted business in Florida, insert "upon qualification."
(SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)

7. 412 East Madison St., Suite 810B, Tampa, Florida 33602

(Principal office address)

412 East Madison St., Suite 810B, Tampa, Florida 33602

(Current mailing address)

8. Private Investigation Agency

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box or Mail Drop Box NOT acceptable)

Name: Business Filings Incorporated

Office Address: 1203 Governors Square Blvd, Suite 101

Tallahassee

(City)

, Florida 32301-2960

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 obligations of my position as registered agent.

Mark Williams A.V.P., Business Filings Incorporated

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

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TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____
_____Director: Karl D. MandersAddress: 1292 East 91st Street, Indianapolis, Indiana 46240

Director: _____

Address: _____
_____**B. OFFICERS**President: Karl D. MandersAddress: 1292 East 91st Street, Indianapolis, Indiana 46240

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. X Karl D. Manders

(Signature of Director or Officer listed in number 12 of the application)

14. Karl D. Manders, President

(Typed or printed name and capacity of person signing application)

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STATE OF INDIANA
OFFICE OF THE SECRETARY OF STATE
CERTIFICATE OF EXISTENCE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To Whom These Presents Come, Greetings:

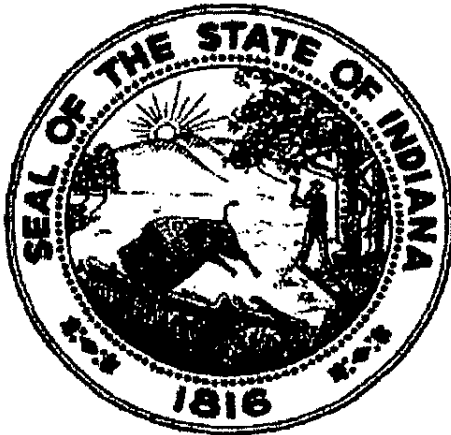
I, TODD ROKITA, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records, and proper official to execute this certificate.

I further certify that records of this office disclose that

CONTINENTAL INCORPORATED, INC.

duly filed the requisite documents to commence business activities under the laws of State of Indiana on March 05, 1990, and was in existence or authorized to transact business in the State of Indiana on October 29, 2008.

I further certify this For-Profit Domestic Corporation has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution or expiration has been filed or taken place.



In Witness Whereof, I have hereunto set my hand and affixed the seal of the State of Indiana, at the city of Indianapolis, this Twenty-Ninth Day of October, 2008.

A handwritten signature in black ink, appearing to read "Todd Rokita".

TODD ROKITA, Secretary of State

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