## P01000045555

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Amend Manue 10 8/22/14

## **COVER LETTER**

**TO:** Amendment Section • Division of Corporations

· ·				
NAME OF CORPORATION: CONTINENTAL AUTO MOVERS CORP				
DOCUMENT NUMBE	DOCUMENT NUMBER: P07000045555			
The enclosed Articles of	Amendment and fee are sub	omitted for filing.		
Please return all correspo	ondence concerning this matt	ter to the following:		
C	GUERY IPARRAGUIRRE			
-	CONTINENTAL	Name of Contact Person		
_	ZOTT THE ETT TA			
		Firm/ Company		
1	10211 PINES BLVD #112			
_		Address		
<u>F</u>	PEMBROKE P	INES, FL 330	26	
		City/ State and Zip Code	e	
ADD 40@VMANI COM				
ADD_16@YMAIL.COM				
E-mail address: (to be used for future annual report notification)				
For further information of	concerning this matter, please	e call:		
<b>GUERY IPA</b>	RRAGUIRRE	<sub>at (</sub> 954	,805-8320	
Name of	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
■ \$35 Filing Fee	□\$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)	
Mailir	ng Address	Street	Address	
Amendment Section		Amendment Section		
Divisio	on of Corporations	Divisio	on of Corporations	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**



## CONTINENTAL AUTO MOVERS CORP

(Name of Corporation as currently filed with the Florida Dept. of State)

nt(s) to

P07000045555			
(Documer	nt Number of Corporation	(if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the fol	lowing amendm
A. If amending name, enter the new na CAR SHIPPING SEF		Р	The nev
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	ion," "company," or "incorporated" or i "Co". A professional corporation name i "P.A."	the abbreviation must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		10211 PINES BLVD #112	
		PEMBROKE PINES, FL 3302	26
			<del></del>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10211 PINES BLVD #112	
		PEMBROKE PINES, FL 3302	<del>26</del>
D. If amending the registered agent an new registered agent and/or the new			<del></del>
Name of New Registered Agent	N/A		
	(Florida s	street address)	
New Registered Office Address:		, Florida	
	(Cit <u>'</u>	y) (Zip Cod	<i>le)</i>
	ered agent. I am familiai	r with and accept the obligations of the posi	ition.
Si	gnature of New Registered	l Agent, if changing	

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			N/A
Add			
Remove			
2) Change			N/A
Add			
Remove			N/A
3) Change			N/A
Add			
Remove			
4) Change	- <u> </u>		N/A
Add			****
Remove			
5) Change			N/A
Add			
Remove			
6) Change		<del></del>	N/A
Add			
Remove			

E. <u>If amen</u>	iding or adding additional Art	cles, enter change(s) here:	
(Attach	additional sheets, if necessary).	(Be specific)	
N/A			
	Advantage visit (California)		
	<del></del>		
· · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	
<del></del>		<u> </u>	
<del></del>			
F. <u>If an ar</u>	mendment provides for an excl	nange, reclassification, or ca	ncellation of issued shares,
provis	s <mark>ions for implementing the amo</mark> f not applicable, indicate N/A)	nament ii not containea iji	the amendment usen:
	not applicable, materie 1471)		
NA			
<del></del>			

date this document was signed.	, if other than the
Effective date if applicable: 8-12-2014	
(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8-12-2014	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
GUERY IPARRAGUIRRE	
(Typed or printed name of person signing)	<del></del>
DIRECTOR	
(Title of person signing)	