## P09000025441

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

Ament 103/30/09

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: CONT	INANZA SERVICI	es corp.
DOCUMENT NUMBER: P090000	25441	
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning t	this matter to the following:	
GiOVANNI CON	UTNANZA e of Contact Person)	
_ Souti HUNS		· <del></del>
·	Firm/ Company)	
5011 SAVANNAH	(Address)	302
ORIAND FL (City/	State and Zip Code)	<u>.</u>
	at (504 ) 250	ne Telephone Number)
Enclosed is a check for the following amount	made payable to the Florida De	epartment of State:
\$35 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 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center ( Tallahassee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

CONTINANTA SERVICES CORP

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

P0900025441

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. I	if amending	name,	enter	the new	name of	the cor	poration:
------	-------------	-------	-------	---------	---------	---------	-----------

corporated" or the abbreviation "Cor, o". A professional corporation of sociation," or the abbreviation "P.A."			
Enter new principal office address, if incipal office address MUST BE A STI			
Enter new mailing address, if applications and address MAY BE A POST Of			
			enter the name of the
If amending the registered agent and new registered agent and/or the new .  Name of New Registered Agent:			enter the name of the
	registered office add		enter the name of the
new registered agent and/or the new  Name of New Registered Agent:	registered office add	ress:	enter the name of the

'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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Africar/Dieseror	GIOVANNI CONTINANZA	SOIL SAVANNAH  PINET WAY #302  ORIANDO EL 32839	Add Remove
			_ □ Add □ Remove
	ling or adding additional Articles, enter of diditional sheets, if necessary). (Be specification of the specificat		
PIER	SÉ ADO THE EIN# a	26-4488625	
<u>  [Fac</u>	Attacluéd		, , , , , , , , , , , , , , , , , , ,
			<u> </u>
provisio	nendment provides for an exchange, recla ons for implementing the amendment if no ot applicable, indicate N/A)		
	N/A		
		100 100 100 100 100 100 100 100 100 100	

The date of each amendment(s) adoption: 03-23-09
Effective date if applicable:  (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem 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 sharehold action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 03-23-69
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)
(Typed or printed name of person signing)
OFF, car and Director (Title of person signing)