PI 1000004725

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Amond C.COULLIETTE APR 11 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	Samanda Industr	ies, Inc.
DOCUMENT N	UMBER:	P1100000	4725
The enclosed Arti	icles of Amendment and fe	e are submitted for filing.	
Please return all c	orrespondence concerning	this matter to the following:	
		Fausto G. DaSilva	
		Name of Contact Person	
	Sa	amanda Industries, Inc.	·
		Firm/ Company	
	1	45 East Bahama Road	
		Address	
400	<u> </u>	inter Springs, FL 32708	go <i>ne</i>
		City/ State and Zip Code	
	E-mail address: (to be a	silvaj1@aol.com used for future annual report notific	cation)
For further inform	ation concerning this matte	er, please call:	
	Fausto DaSilva	at (407) Area Code & Day	695-6318
Name	e of Contact Person	Area Code & Day	time Telephone Number
Enclosed is a chec	k for the following amount	t 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 end	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing A Amendmen Division of P.O. Box 6	nt Section	Street Address Amendment Section Division of Corporati Clifton Building	ons
Tallahassee, FL 32314		2661 Executive Cente	er Circle

Tallahassee, FL 32301



March 30, 2011

FAUSTO G. DASILVA SAMANDA INDUSTRIES, INC. 145 EAST BAHAMA RD WINTER SPRINGS, FL 32708

SUBJECT: SAMANDA INDUSTRIES, INC.

Ref. Number: P11000004725

We have received your document for SAMANDA INDUSTRIES, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

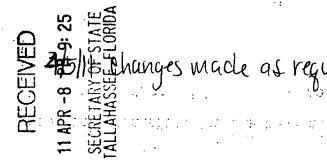
You must check one of the blocks on the last page to indicate the manner of adoption.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 111A00007678



Articles of Amendment to Articles of Incorporation of

	Industries, Inc.			
(Name of Corporation as curren	ntly filed with the Florida Dep	t. of State)		
	000004725			
(Document Numb	per of Corporation (if known)			
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	, Florida Statutes, this Florida	Profit Corporation ado	pts the follo	wing
A. If amending name, enter the new name of t	the corporation:			
name must be distinguishable and contain th			_The new	
abbreviation "Corp.," "Inc.," or Co.," or the aname must contain the word "chartered," "profest. B. Enter new principal office address, if applia (Principal office address MUST BE A STREET) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or renew registered agent and/or the new regist. Name of New Registered Agent:	essional association," or the abcable: ADDRESS EBOX gistered office address in Flor	breviation "P.A."	11 APR -8 AM 10: 2	OVISION OF COOP STATE
New Registered Office Address:	(Florida street address)		
_		, Florida_		
	(City)	(Zip Code)	_	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ago		ept the obligations of the	e position.	

Signature of New Registered 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	Jack G DaSilva	2935 Willow Bay Terrace Casselberry, FL 32707	_ ☑ Add _ □ Remove
			_
			_ ☐ Add _ ☐ Remove
	ding or adding additional Artic dditional sheets, if necessary).		
provisi	mendment provides for an exchons for implementing the amento applicable, indicate N/A)	ange, reclassification, or cancellation of indicated and the amendment of	ssued shares, titself:

The date of each amendment(s) adoption: $02-12-1$
Effective date <u>if applicable</u> :	s) adoption: ()2-12-11 (date of adoption is required)
Enterne date <u>in applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
The amendment(s) was/were must be separately provided	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	ast for the amendment(s) was/were sufficient for approval
by	.,,,,
((voting group)
action was not required.	e adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Dated <u>2</u>	-/2-1/
(By a selec	Faust Valley I director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Fausto DaSilva
	(Typed or printed name of person signing)
	President
	(Title of person signing)