Page 1 of 2

### Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000278158 3)))



H100002781583ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

: (850)222-1092

Fax Number

: (850)978-5368

			address										
யு≲an	nual	repor	t mailin	gs.	Enter	only	one	email	add	res	s ple	ase.	**
医医	., .												

### COR AMND/RESTATE/CORRECT OR O/D RESIGN DELTA ENVIRONMENTAL CONSULTANTS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

### COVER LETTER

Division of Corporations	Ç.
SUBJECT: Delta Environmental Consultants, Inc.	of Corporation
DOCUMENT NUMBER: P12249	2 Outpolation
The enclosed Amendment and fee are submi	tted for filing.
Please return all correspondence concerning	•
Liba Hantwig Name of Contact Person	
Deffa Consultants / Anka US Firm/Company 5910 Rice Creek Pankway, S	4, Inc.
5910 Rice Creek Ponkway, S	rife 100_
Shaveview, MN 55124 City/State and Zip Code	
RManagementDepartment@deltae E-mail address: (to be used for future annual	
For further information concerning this matte	r, please call:
VISA HAVIWI'9 Name of Contact Person	at (651) 697-5129 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)  \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Amendment Section A Division of Corporations E P.O. Box 6327 C Fallahassee, FL 32314 2	Street Address: Amendment Section Division of Corporations Clifton Building 661 Executive Center Circle Callahassee, FL 32301

1 - 05/07/2009 C Thiling Messager Collins

# PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA (Pursuant to s. 607.1504, F.S.)

# SECTION I

· (1-3 MC	ist be completed)		De Co
	P12249		75. 63
(Document num	nber of corporation (if know	wn)	OK 30
		• • •	
1. Doita Enviro	onmental Consultants, Inc.		W. C.
(Name of corporation as it appe		epartment of State)	- CO-
· · · · · · · · · · · · · · · · · · ·			
2. Mingesola	₹.	11/21/198	6
(Incorporated under laws of)	(Date a	nuthorized to do busine	ss in Plorida)
•		5	
	ECTION II LY THE APPLICABLE C	Hanges)	
4. If the amendment changes the name of the corpora	ation, when was the ch	ange effected unde	r the laws of
its jurisdiction of incorporation? 12/08/		•	
in Juriadiocation of interpretations	<u>~~~</u>	-	
5. Antes USA, Inc.			
(Name of corporation after the amondment, adding appropriate abbreviation, if not contained in new	suffix "corporation," name of the corporation	"company," or "in in)	corporated," or
•	•		
(If new name is unavailable in Florida, enter alternations business in Florida)	ate corporate name add	pted for the purpos	se of transacting
			•
6. If the amendment changes the period of duration, i	ndicate new period of	duration.	
	New duration)		
•	• •		
7. If the amendment changes the jurisdiction of incorp	poration, indicate new	jurisdiction.	
(Ne	w Jurisdiction)	1	
8. Attached is a certificate or document of similar imperent of delivery of the application to the D having custody of cerporate records in the jurisdict	port, evidencing the an epartment of State, by ion under the laws of v	endment, authentic the Secretary of St which it is incorpor	cated not more than ate or other official ated.
- dellant			
Signature of a director, president of other officer - if of a receiver or other court appointed fiduciary, by the	in the lunds at fiduciary)	. 4	. •
Liba A. Hartwin	AGS).	Stant SURH	ENU
(Typed of printed name of person signing)		lile of person signing)	

## STATE OF MINNESOTA

DEPARTMENT OF STATE I hereby certify that this is a true and complete copy of the document as filed for record in this office.

DATED 17/79/7010

Secretary of State

DC CN





#### STATE OF MINNESOTA SECRETARY OF STATE

#### AMENDMENT OF ARTICLES OF INCORPORATION

READ THE INSTRUCTIONS BEFORE COMPLETING THIS FORM

- Retain the original signed copy of this document for your records and submit a legible photocopy for filing with the Secretary of State.
- There is a \$35.00 fee payable to the MN Secretary of State,
- 3. Return Completed Amendment Form and Fee to the address listed on the bottom of the form.

CORPORATE NAME: (List the name of the company prior to any desired name change)

Delta Environmental Consultants, Inc.	
This amendment is effective on the day it is filed with the Secretary of State, ur 30 days after filing with the Secretary of State.	less you indicate another date, no later than
01/05/2011	Format (mm/dd/yyyy)
The following amendment(s) to articles regulating the above corporation were a	idopted: (Insert full text of newly amended

article(s) indicating which article(s) is (ere) being amended or added.) If the full text of the amendment we not in the space provided, attach additional pages.

#### ARTICLE

The following amendment to the Articles of Incorporation for Delta Environmental Consultants, Inc. corporation was adopted effective December 08, 2010;

ARTICLE L

The name of the Corporation shall be Antes USA, Inc.

This amendment has been approved pursuant to Minnesota Statutes, Chapter 302A or 317A.

i, the undersigned, certify that I am signing this document as the person whose signature is required, or as egent of the person(s) whose signature would be required who has authorized me to sign this document on his/her behalf, or in both capacities. I further certify that I have completed all required fields, and that the information in this document is true and correct and in confidence with the applicable chapter of Minnesota Statutes. I understand that by signing this document I am subject to the people of perjury as set torther section 609.48 as if I had signed this document under oath.

Signature of Authorized Person or Authorized Agent

Name and telephone number of contact person: Gery M. Wisniewski, Chief Executive Office Of **Wimber** Please Print Legibly

> · FILE IN-PERSON OR MAIL TO: Minmeacta Secretary of State - Business Services DEC 1 3 2010.

Retirement Systems of Minnesota Building 60 Empire Drive, Suite 100 St Paul, MN 55103

Mark Hablic

(Staffed 8:00 - 4:00, Monday - Friday, excluding holiday sporetary of State

To obtain a copy of a form you can go to our web site at <a href="https://www.sos.state.mn.us">www.sos.state.mn.us</a>, or contact us between 9:00am to 4:00pm, Monday through Friday et (861) 296-2603 or toll free 1-877-551-6767.

All of the information on this form is public. Minnesota law requires certain information to be provided for this type of filing. If that information is not included, your document may be returned unitied. This document can be made evaliable in alternative formats, such as large print, Braille or audio tape, by calling (651) 295-2803/volce. For a TTY/TTD (deaf and hard of hearing) communication, contact the Minnesota Relay Sendo at 1-800-627-3529 and ask them to place a call to (651)296-2803. The Secretary of State's Office does not discriminate on the basis of race, creed, color, sex, sexual orientation, national origin, age, marital status, disability, religion, reliance on public exsistance or political opinions or affiliations in employment or the provision of service.