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.

(((H18000010490 3)))



H160000104903ABCX

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

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : I20000000019

Phone

: (305)552-5973

Fax Number : (305)675-5944

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN CONFIDENCE AUTO TRANSPORT INC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

							•				
4/29/2013 (03: 08	 305220144	0	LAZA	RUS	j			: PAGE	02/02	
						18 JAN	1-9 A	<u>M</u> 8: 37)		
			A	rticles of Amer	ndment	SEMP FALE YOU		800	0 0 1 (}	049()
,			Ar	to ticles of Incorp	poration	•					
	(Confi	ider	of	rAd)	1	Tire	inspo	x	المر	
		م.						11-19/0	<u>'! </u>	In	
Florida Do	ocument	Number:	140	0000	365	27				: .	
Pursuant to following	o the pro- amendm	visions of sec ent(s) to its A	tion 607.1000 rticles of Inco	5. Florida Statut prporation:	cs. this Fl	orida Pro	ifit Cor	poration	adopts th	ne :	
B.	em	ove:		HISOr	1	2.91	\sim 0	<u> </u>			
											
AD	<u>0:</u>	Reyv	raldo	<u>. No</u>	Ne	7	as	,al	(P)	Rn	`
	5	12	S	<u> ۱۹٬</u>	9 10	<u> -AV</u>	e				
	1	lian	ni	FL		331	74			· · ·	
					:						
											
		 					· i				
							<u> </u>				
									~. -		
These artic	les of ame	endm e nt were :	adopted on	1/9	/ 1/8	3 .					
				k. This amendme	ent was abo	oroved by t	he share	holders and	d the num	ber of	
votes cast f	for amend	ment was suffi	cient for appro	val.		•					
		R-1	Joff (Signature						!	
			N	elson	<u>2</u> \$	mora(PI	\			
				Printed Name and	· MIC						
New Regis	stered Age cept the apj	nt's Signature. pointment us reg	if changing R	egistered Agent: pm familian with a	nd accept th	u obligation	is of the p	osiilon			
		^ ~	1//				1				

H 1800001104:90