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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

...

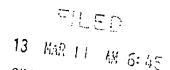
NAME OF CORPORATION: TRANSILVADOCUMENT NUMBER: P96000043479	ANIA, INC.			
The enclosed Articles of Amendment and fee are sub-				
Please return all correspondence concerning this matter	er to the following:			
COSMIN UDOR C	R JOHN BALE	ANU		
	Name of Contact Person			
TRANSILVANIA, I	NC.			
	Firm/ Company			
2009 HARRISON	STREET			
· · · · · · · · · · · · · · · · · · ·	Address			
HOLLYWOOD, FL	33020			
	City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please COSMIN UDOR JOHN BAU Name of Contact Person	call: (954)	294-6969		
COSMIN UDOR / TOHN BATE	50NU at 786	, 955 - 4530		
Name of Contact Person	Area Cod	e & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department 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		Address nent Section n of Corporations		

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



TRANSILVANIA, INC.

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

dment(s) to

P96000043479		- LORIDA
(Documer	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Pro	fit Corporation adopts the following amends
A. If amending name, enter the new na	me of the corporation:	
		The n
name must be distinguishable and con "Corp" "Inc.," or Co.," or the design vord "chartered," "professional associa	ation "Corp," "Inc," or "Co". A pro	any," or "incorporated" or the abbreviation of the abbreviation of the abbreviation of the abbreviation to the abbreviation to the abbreviation to the abbreviation of
B. Enter new principal office address,		
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)	
		
Enter new mailing address, if appli (Mailing address MAY BE A POST)		
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
		
). If amending the registered agent an		ida, enter the name of the
new registered agent and/or the new	<u>w registered office address:</u> COSMIN UDOR OR JOHN	NRALEANII
Name of New Registered Agent		
	2009 HARRISON STR	EEI
New Registered Office Address:	(Florida street address) HOLLYWOOD	33030
	(City)	, Florida 33020 (Zip Code)
	(a)(y)	(2.5 2022)
New Registered Agent's Signature, if c hereby accept the appointment as regist		A the size of the second
AC.	eraa ageni. Tam jaminar wiin ana acc	eff the objections of the position.
	onature of New Registered Agent if the	inging
	gnature of New Registered Agent, if cha	inging

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) K Change	<u>P</u>	COSMIN UDOR	300 NE 12TH AVE
Add			APT. 408
Remove			HALLANDALE BEACH, FL 33009
2) Change	Т	JOHN BANU	1460 SW 96 TERRACE
Add			DAVIE, FL 33324
X Remove			
3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			· · · · · ·

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
New shareholder ownership is as follows:
* Cosmin Udor - 50% shareholder
* John Baleanu - 50% shareholder
Former Treasurer, John Banu is no
longer affiliated with Transilvania, Inc
and has no further ownership rights
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s)	March, 1st, 2013
Effective date if applicable:	arch 1st, 2013
<u></u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/were a by the shareholders was/were	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
"The number of votes ca	t for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were a action was not required.	opted by the incorporators without shareholder action and shareholder
_{Dated} Marc	1 1st, 2013
Signature(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Cosmin Udor / John Baleanu
	(Typed or printed name of person signing)
	PRESIDENT / PRESIDENT
	(Title of person signing)