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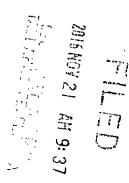
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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPORA	TION: <u>KRAL</u>	TH CONSTRIX	TION INC.
DOCUMENT NUMBE	R:	000055763	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	ر	1/11/10	1
	5	Name of Contact Perso	n
	KRAUTH	CONSTRUCTO	DAY TAXC
	73.17.2.77	CONSTRUCTION Firm/ Company	70 270 -
		ARFIELD AUE Address	
	WENICE	FL 34285 City/ State and Zip Cod	
		City/ State and Zip Cod	e
	EAGLE	TARVADAL	OM
	E-mail address: (to be us	Sed for fature annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
ERI	C KRAUTH	at (94/	150-5213
Name of (Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	ne following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status
Amend Divisio P.O. Bo	g Address ment Section n of Corporations ox 6327 ssee, FL 32314	Amend Division Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	NCTION, FNC. on as currently filed with the Flor	rida Dept. of State)	
P04000	055763		
(Docum	ent Number of Corporation (if known	wn)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corpo	pration adopts the following amer	ndment(s) to
A. If amending name, enter the new name of the co	rporation:		
		The	new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the c	" "Inc," or "Co". A professiona	"incorporated" or the abbrevio	ation
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADD</u>			
	-	2016 TAL	
		<u> </u>	
C. Enter new mailing address, if applicable:		in the second	Commences.
(Mailing address <u>MAY BE A POST OFFICE BO)</u>	<u></u>	- 2	
	440.4		<u> </u>
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		<u> </u>	
 If amending the registered agent and/or registered new registered agent and/or the new registered of 		r the name of the	
Name of New Registered Agent			
	(Florida street address)		
	(1 to the bit cor dutil cos)		
New Registered Office Address:	(City)	, Florida (Zip Code)	_
	· · · · · · · · · · · · · · · · · · ·	(/	
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent.		hlipations of the position	
accept the appointment to regulered agent. I	. ит јатина жин ини иссері те от	onguions of the position.	
Signa	uture of New Registered Agent, if ch	hanging	

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 <math>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 Do	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change		-		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
A) Change				
4) Change Add		_		****
Remove				
1.6.116.116				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment isself: (if not applicable, indicate NIA) CHANGE ESILE KRAUTH 50% FRICA KRAUTH 50% FOLICE KRAUTH 80% ESILEA KRAUTH 20	tach additional sheets, if necessary). (Be sp	vecific)			
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The date of each amendment(s) adoption: date this document was signed.	11/18/110	, if other than the
Effective date <u>if applicable</u> :		
•	(no more than 90 days after amendment file da	ite)
Note: If the date inserted in this block does not document's effective date on the Department of S		ents, this date will not be listed as the
Adoption of Amendment(s) (<u>CHI</u>	ECK ONE)	
The amendment(s) was/were adopted by the s by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the a oproval.	mendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting a	shareholders through voting groups. The follow group entitled to vote separately on the amendn	
"The number of votes cast for the amend	dment(s) was/were sufficient for approval	
by	ng group)	
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☐ The amendment(s) was/were adopted by the b action was not required.	oard of directors without shareholder action and	l shareholder
☐ The amendment(s) was/were adopted by the in action was not required.	ncorporators without shareholder action and sha	reholder
Dated	18/16 Val	
(By a director, president)	lent or other officer - if directors or officers have	/c not been
selected, by an incor appointed fiduciary	porator - if in the hands of a receiver, trustee, o	r other court
	FAK KRAUTIA Typed or printed name of person signing)	
	Typed or printed name of person signing)	
	VICE PAESIDEAT (Title of person signing)	
	(Title of person signing)	