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Special Instructions to	Filing Officer:	
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COVER LETTER

TQ: Amendment Section Division of Corporations
NAME OF CORPORATION: Fulco Construction INC
DOCUMENT NUMBER: <u>PO70000 3/0/</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Deborah R. fultz Name of Contact Person
Firm/ Company
4606 19 Dwe. West Address
Bradenton florida 32209 City/State and Zip Code Fultz 2204 @ Yahao .com E-mail address: (to be used for future armual report notification)
For further information concerning this matter, please call:
Deborah R. Fultz at (94) 201-4611 Name of Contact Person at (94) 201-4611 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
Certificate of Status Certificate Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to Articles of Incorporation

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	of		
<u> </u>	onstruction	in Inc.	
(Name of Corporation as curre	ently filed with the Florid	1a Dept. of State)	
(Document Num	ber of Corporation (if known	own)	
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this I	Florida Profit Corporation adop	ts the following
A. If amending name, enter the new name of	the corporation:		
+ 4 00	TNO		The new
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "In	c," or "Co". A professional co	
B. Enter new principal office address, if app	licable:		_
(Principal office address <u>MUST BE A STREE</u>	<u>TADDRESS</u>)		
	****		-
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFIC			
		Į.	3 3 3 3 3 3 3 3 3 3
		, A.	MAR -8
D. If amending the registered agent and/or r	egistered office address	in Florida, enter the name of th	HA 8-
new registered agent and/or the new regis		والموسية	PH PH
Name of New Registered Agent:			
			37
New Registered Office Address:	(Florida street	address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changir	ng Registered Agent:		
I hereby accept the appointment as registered a	gent. I am familiar with	and accept the obligations of the	position.
		· · · · · · · · · · · · · · · · · · ·	
S	ignature of New Registere	ed Agent, if changing	

The date of each amendment(s) adoption: 3/5/10
(date of adoption is required)
Effective date if applicable: (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
by" (voting group)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated 3-65-2010
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – ikin the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
Deborah R. fultz (Typed or printed name of person signing)
(Title of person signing)