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; (Re	questor's Name))
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(Cit	y/State/Zip/Phon	ne #)
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Amend Newis 712-11

COVER LETTER

FO: Amendment Section Division of Corporations	
Fax # 850 - 245 - 6897	• • •
	ternational Construction Trading, INC
DOCUMENT NUMBER:P	11 0000 29817
The enclosed Articles of Amendment ar	I fee are submitted for filing.
Please return all correspondence concer	ing this matter to the following:
Made	Name of Contact Person
Intern	ational Construction Trading, Inc.
804 Cres	Top Trail Address
Valrico,	FL 33594 City/ State and Zip Code
Madelyn 1 E-mail address:	81 @ qmail. com be used for tulure annual report notification)
For further information concerning this	natter, please call:
Madelyn Alvarez	at (813) 240 -0801
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following a	nount made payable to the Florida Department of State:
□ \$35 Filing Fee □ \$43.75 Filing Fee Certificate of Sta	
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

FHED

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	Articles of Incorporation of	- 11 JUL 12 PM 1:31
	NSTRUCTION TRADING, INC	
	····	<u></u>)
· · · · · · · · · · · · · · · · · · ·	1000029817 umber of Corporation (if known)	
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation	:	Corporation adopts the following
A. If amending name, enter the new name	of the corporation:	
		The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to name must contain the word "chartered," "p B. Enter new principal office address, if an (Principal office address)	he designation "Corp," "Inc," or "Co". I professional association," or the abbreviati pplicable:	A professional corporation
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF</u>)		
D. If amending the registered agent and/o new registered agent and/or the new re		er the name of the
Name of New Registered Agent:		_
New Registered Office Address:	(Florida street address)	_
	(Cit.)	, Florida p Code)
	(City) (Zi	p Code)
New Registered Agent's Signature, if chan		
I hereby accept the appointment as registered	d agent. I am familiar with and accept the	obligations of the position.

Signature of New Registered Agent, if changing

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)

<u> Fitte</u>	Name	Address	Type of Action
VP	JESUS Correa	804 Crest Top Trail VALRICO, PL 137594 USA	☑ Add □ Remove
			☑ Add □ Remove
			☐ Add ☐ Remove
E. If amen	ding or adding additional Articles, entereditional sheets, if necessary). (Be spe	er change(s) here: cific)	
,			
			** *
provi	emendment provides for an exchange, resident for implementing the amendment inot applicable, indicate N/A)	eclassification, or cancellation of is if not contained in the amendment	sued shares, itself:

The date of each amendmen	t(s) adoption: 6/25/2011
	(date of adoption is required)
Éffective date <u>if applicable</u> :	6/25/2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	,")
· · · · · · · · · · · · · · · · · · ·	(voting group)
action was not required.	vere adopted by the board of directors without shareholder action and shareholder vere adopted by the incorporators without shareholder action and shareholder
Dated <u>6/2</u> Signature _ (B se	By a director, president on other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary) MADELYN ALVAREZ
	(Typed or printed name of person signing)
	() () () () () () () () () ()
	PD
	(Title of person signing)