P13000011077

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SECRETAR OF STATE
AND MASSEE FLORIDA

APR 1 6 2014

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

	_{ATION:} FCA CONS _{ER:} P1300001107		SONS, INC
	of Amendment and fee are su		
Please return all corres	pondence concerning this ma	tter to the following:	
	JENNIFER JOHN	ISON	
•		Name of Contact Person	1
	FCA CONSTRUC	CTION & SONS	INC
-	·	Firm/ Company	
	2222 DURANT R	D.	
•		Address	
	VALRICO, FL 33	596	
•		City/ State and Zip Cod	e
FC	ACONSTRUCTIO	NWATHUU CC	N A
<u></u>		sed for future annual report	
	2 audi 000. (00 00 au	ion in this annual report	
For further information	concerning this matter, pleas	se call:	
JENNIFER		at (813	, 654-7067
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
<u>Mail</u>	ing Address	Street	Address
	ndment Section		lment Section
	sion of Corporations		on of Corporations
	Box 6327 hassee, FL 32314		Building xecutive Center Circle
, and			assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

FCA CONSTRUCTION & SONS, INC

14 APR 09 PM 12: 16

SECRETARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of State) TALLAHASSEE, FLORIDA P13000011077 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered 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)

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.

X Change	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	М		CHRISTOPHER REAGAN	2222 DURANT RD
Add				VALRICO, FL 33596
Remove				
2) Change	М	_	GORDON HOUSTON JR	1308 HIGHVIEW RD
✓ Add				BRANDON, FL 33510
Remove				
3) Change				
Add				
Remove				<u></u>
4) Change				
Add				
Remove				
5) Change)
Add				· · · · · · · · · · · · · · · · · · ·
Remove				***************************************
6) Change				
Add				
Remove				

	(Be specific)

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an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
rovisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
rovisions for implementing the ame	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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rovisions for implementing the ame	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 by the shareholders was/were sufficient for approval.	nent(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following stamust 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"	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and share action was not required.	holder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharehold action was not required.	er
Dated	
Signatur Sunuku Market	
(By a director, president or other officer – if Alrectors or officers have not	
selected, by an incorporator—if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	coun
JENNIFER JOHNSN	
(Typed or printed name of person signing)	
PRESIDENT/DIRECTOR	
(Title of person signing)	

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SECRE LART OF STATE
TALLAHASSEE, FLORDA