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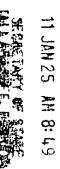
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(Requestor's Name)
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Amendo

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CO)RPOR	ATION: Art isCreation	on, Inc.				
DOCUMENT	NUMB	ER: N10000005213					
The enclosed A	irticles o	f Amendment and fee are sub	bmitted for	filing.			
Please return a	il corresi	oondence concerning this mat	tter to the f	ollowing	; :		
•			ina F. Wi			·	
		(Name of	Contact P	erson)			
		Art is	.Creation	, Inc.			
		(Firn	n/ Compan	y)			•
				D-			, "
	****	1220 G	ommodo Address)	re pr.			
			,		•		
		New Smyrn			68		
		(City/ Sta	ate and Zip	Code)			
		wiseregi	na@gma	il.com			
		E-mail address: (to be use			report notificat	ion)	_
For further info	ormation	concerning this matter, pleas	se call:				
Posina E M	lico			386	√428-1876		
Regina F. W	Name o	f Contact Person)	at ((Area (Code & Daytime	e Telepho	ne Number)
Enclosed is a c	heck for	the following amount made	payable to	the Flori	da Department o	of State:	
☑\$35 Filing F	ee	☐ \$43.75 Filing Fee & Certificate of Status	Certif	ied Copy tional co	ng Fee & y ppy is	Certific Certific (Additi	50 Filing Fee cate of Status ed Copy onal Copy losed)
i	Amend	z Address ment Section		Amend	Address Iment Section		
	Divisio P.O. Bo	n of Corporations ox 6327		Clifton	on of Corporation Building		
	Tallaha	ssee, FL 32314			Executive Center (assee, FL 32301	Circle	

Articles of Amendment to Articles of Incorporation of

		_		_
Δrt	ic	Crea	tion	Inc
	10		WOL.	III IU.

(Name of Corporation as currently filed with the Florida Dept. of State

N10000005213

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. <u>I</u>	f amending	name, enter th	e new name of	the corporation:
-------------	------------	----------------	---------------	------------------

The new name must be distinguishable and c abbreviation "Corp." or "Inc." "Company" or		
B. Enter new principal office address, if app (Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable		IAN 25
(Mailing address <u>MAY BE A POST OFFI</u>	CE BOX)	
	-	######################################
D. If amending the registered agent and/or new registered agent and/or the new regi	-	enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
		, Florida
	(City)	(Zip Code)

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			_ □ Add _ □ Remove
<u></u>			_
			_
Article VIII S and scientific	g or adding additional Articles, enter tional sheets, if necessary). (Be speci Said organization is organized ex c purposes under section 501(c)(ng section of any future federal ta	clusively for charitable, religi (3) of the Internal Revenue C	
	on the dissolution of the organize t purposes within the meaning of		ted for one or

The date of each amend	ment(s) adoption: January 21, 2011
Effective date if applica	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendmen	et(s) (<u>CHECK ONE</u>)
The amendment(s) was/were sufficient fo	as/were adopted by the members and the number of votes cast for the amendment(s) r approval.
There are no member adopted by the board	s or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.
Dated_	January 21, 2011
Signatı	reRegina Wise
	(By the chairman or vice come Line of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Regina F. Wise
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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