2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
May 13, 2009
Secretary of State

DOCUMENT# P01000047210

Entity Name: ARTISTIC PROJECTS, INC.

Current Principal Place of Business:

8632 U.S. HWY 441 SE
#18
OKEECHOBEE, FL 34974 US

New Principal Place of Business:

8362 U.S. HWY 441 SE
#18
OKEECHOBEE, FL 34974 US

Current Mailing Address:

8632 U.S. HWY 441 SE
#18
OKEECHOBEE, FL 34974 US

New Mailing Address:

8362 U.S. HWY 441 SE
#18
OKEECHOBEE, FL 34974 US

FEI Number: 59-3717496 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SOKOLOWSKI, MARK
8632 U.S. HWY 441 SE
#18
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

SOKOLOWSKI, MARK
8362 U.S. HWY 441 SE
#18
OKEECHOBEE, FL 34974 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MARK SOKOLOWSKI 05/13/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SOKOLOWSKI, MARK
Address: 8632 U.S. HWY 441 SE #18
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: D ( ) Delete
Name: BLACK, TINA
Address: 211 MEADOWS DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SOKOLOWSKI, MARK
Address: 8362 U.S. HWY 441 SE #18
City-St-Zip: OKEECHOBEE, FL 34974 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARK SOKOLOWSKI PD 05/13/2009
Electronic Signature of Signing Officer or Director Date