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(Requestor's Name)	
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(City/State/Zip/Phone #)	
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(Business Entity Name)	07/09/0701010013 **3
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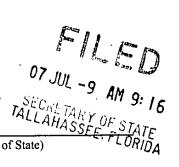
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ARTISTIC BRI	ск со	
DOCUMENT NUMBER: P06000052025		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this n	natter to the following:	
APRIL PEACH CONDRON		
(Name of C	Contact Person)	
CAPE COD MGMT SVC INC	_	
(Firm/	Company)	
314 NE 27TH STREET		
(A	ddress)	
WILTON MANORS FL 33334-2020		
	and Zip Code)	
For further information concerning this matter, ple	ease can.	
APRIL PEACH CONDRON	at ( 954 ) 630-8300 (Area Code & Daytime T	
(Name of Contact Person)	(Area Code & Daytine	eteptione Number)
Enclosed is a check for the following amount:		
✓ \$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)
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 Circ	ele

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



ARTISTIC BRICK CO

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

P06000052025
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ARTICLE VII BOARD OF DIRECTORS: THE CORPORATION HAS THREE OFFICERS. THE NAME AND ADDRESS
OF THE OFFICERS WHO SUBJECT THE PROVISIONS OF THE CORPORATION AND THE STATUES OF THE STATE OF FLORIDA,
SHALL HOLD OFFICE FOR THEIR SUCCESSORS, HAVE BEEN ELECTED AND QUALIFIED, ARE AS FOLLOWS:
DIRECTOR: SIDNEY JUSTINO 1016 SWEETBROOK WAY ORLANDO FL 32828
DIRECTOR: GERALDO R DO NASCIMENTO 125 SWEETBAY LANE ORLANDO FL 32835
DIRECTOR: MARCEL D SILVA 4056 MIDDLEBROOK ROAD #1315 ORLANDO FL 32811
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A
SHARES SHALL BE REDISTRIBUTED AS FOLLOWS:
100 SHARES GERALDO R DO NASCIMENTO, 100 SHARES MARCEL D SILVA
SHARES FOR SIDNEY JUSTINO REMAIN THE SAME
(continued)

The date of each amendmen	it(s) adoption: 6/27/2007
Effective date if applicable:	6/27/2007
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	) was/were approved by the shareholders. The number of votes cast for by the shareholders was/were sufficient for approval.
	) was/were approved by the shareholders through voting groups. The nt must be separately provided for each voting group entitled to vote amendment(s):
"The number of	of votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
	) was/were adopted by the board of directors without shareholder action ction was not required.
The amendment(s) shareholder action	) was/were adopted by the incorporators without shareholder action and was not required.
selec	director, president or other officer - if directors or officers have not been cited, by an incorporator - if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
DIF	RECTOR (Typed or printed name of person signing)
	Codem Erman summa as Kannas asiBusinibs
SIC	ONEY JUSTINO
	(Title of person signing)