2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000023876

Entity Name: ARTISTIC WOODWORKING, INC.

FILED May 03, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1694 SE NIEMEYER CIRCLE2710 SW EDGARCE STREETPORT SAINT LUCIE, FL 34952PORT SAINT LUCIE, FL 34953

Current Mailing Address: New Mailing Address:

1694 SE NIEMEYER CIRCLE 2710 SW EDGARCE STREET PORT SAINT LUCIE, FL 34952 PORT SAINT LUCIE, FL 34953

FEI Number: 20-8500667 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATE CREATIONS NETWORK, INC.

11380 PROSPERITY FARMS ROAD #221E

PALM BEACH GARDENS, FL 33410 US

DONNA, BLAIR

3331 SW LUDLOW ST

PORT SAINT LUCIE, FL 34953 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: DONNA BLAIR 05/03/2009

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: BLAIR, GLENDON Name: BLAIR, GLENDON

 Name:
 BLAIR, GLENDON
 Name:
 BLAIR, GLENDON

 Address:
 1694 SE NIEMEYER CIRCLE
 Address:
 2710 SW EDGARCE STREET

 City-St-Zip:
 PORT SAINT LUCIE, FL 34952
 City-St-Zip:
 PORT SAINT LUCIE, FL 34953

Name: BLAIR, DONNA Name: BLAIR, DONNA

Address: 1694 SE NIEMEYER CIRCLE Address: 2710 SW EDGARCE STREET
City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34953

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: DONNA BLAIR OFFI 05/03/2009