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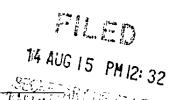
AUG 2 2 2014 C. CARROTHERS

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO		BRICK PAVER	SEALING, INC
DOCUMENT NUMI	<sub>BER:</sub> P1200003252	5	
	of Amendment and fee are su		
Please return all corre	spondence concerning this ma	tter to the following:	
	Gary Burke		
		Name of Contact Person	1
	Reliable Brick Pa	ver Sealing Inc	
		Firm/ Company	
	5294 Mahogany	Run Ave	
		Address	
	Sarasota, FL 342	241	
		City/ State and Zip Cod	e
pat	syandgary@como	east net	
Par		sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
Gary Burke		at (941	780-5814
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assec, FL 32301

### **Articles of Amendment** Articles of Incorporation



#### RELIABLE BRICK PAVER SEALING, INC

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

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(Document Number of Corporation (if known)

ndment(s) to

A. If amending name, enter the new name of the corporation:  The name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contaword "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:	Pursuant to the provisions of section 607,1006, Flo its Articles of Incorporation:			
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrev "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contaword "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	A. If amending name, enter the new name of th	e corporation:		
"Corp.," "Inc" or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contoword "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				The
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	"Corp.," "Inc.," or Co.," or the designation "C	Corp," "Inc." or "Co". A		
(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				
	D. If amending the registered agent and/or reg	istered office address in F	larida enter the nam	e of the
			iorna, enter the nam	<del>c or enc</del>
Name of New Registered Agent	Name of New Registered Agent			
(Florida street address)		(Florida street addre:	ss)	
New Registered Office Address:, Florida,	New Registered Office Address:	-	, Florida	
(City) (Zip Code)		(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			accept the obligations	of the position

## 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name .	Address
1) Change	VP	Andrew Hasskarl	1505 24th St
✓ Add			Sarasota, FL 34234
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
4) Change			
Add			
Remove			***************************************
5) Change			
Add			***
Remove			
6) Change			
Add			
Remove			

ttach aa	ng or adding additional A ditional sheets, if necessary,	). (Be specific)	l		
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an ame	ndment provides for an ex	change, reclass	ification, or can	cellation of issued	shares,
<u>orovisio</u>	ns for implementing the ar ot applicable, indicate N/A)	nendment if not	contained in th	<u>e amendment itsel</u>	<u>f:</u>
(ij n	л аррисате, такае к/х)				
		<del></del>			

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(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must 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"	
by"  (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Man W Bull	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
You Bucke	
(Typed or printed name of person signing)	
President	
(Title of person signing)	