(Red	questor's Name)	
(Add	lress)	
(Add	Iress)	
(City	//State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: RELIABLE ER: P1200003252	BRICK PAVER 5	SEALING, INC.			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this mat	ter to the following:				
	Gary Burke					
-		Name of Contact Person	1			
	RELIABLE BRICI	K PAVER SEAL	ING, INC.			
•		Firm/ Company				
	5294 MAHOGANY RUN AVE					
		Address				
	SARASOTA, FL	34241				
-		City/ State and Zip Cod	e			
pats	syandgary@como	cast.net				
<u> </u>	E-mail address: (to be us	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
Gary Burke		at ( <u>941</u>	780-5814			
Name o	of Contact Person		de & Daytime Telephone Number			
Enclosed is a check for	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		Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301				

## Articles of Amendment to Articles of Incorporation

FILED

## RELIABLE BRICK PAVER SEALING, INC.

2015 APR 13 PM 3: 47

to

( <u>Name of Corporation as currently</u> P12000032525	filed with the Florida	Dept. of St	ate) % 5 %  ALLAH	ASSEE. FL	ORIDA
(Document Number	of Corporation (if know	n)	9	2.,	
ursuant to the provisions of section 607.1006, Flor s Articles of Incorporation:	ida Statutes, this <i>Florido</i>	a Profit Coi	<i>rporation</i> add	opts the follow	ring amendmi
. If amending name, enter the new name of the	corporation:				
					The new
ame must be distinguishable and contain the w Corp.," "Inc.," or Co.," or the designation "Co ord "chartered." "professional association," or ti	rp," "Inc," or "Co"				
Enter new principal office address, if applical rincipal office address MUST BE A STREET AL	<u>DDRESS</u> )				
	_				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE E	<u> </u>				
. If amending the registered agent and/or regisnew registered agent and/or the new registered		Florida, en	ter the name	e of the	
Name of New Registered Agent					
<u></u>					
	(Florida street addr	ress)			
New Registered Office Address:	(City)		, Florida	(Zip Code)	<del></del>
ew Registered Agent's Signature, if changing R	egistered Agent:				
iereby accept the appointment as registered agent	. I am familiar with and	d accept the	e obligations	of the position	1.
C'2	New Registered Agent, i	if above			

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	HASSKARL, ANDREW	1505 24TH ST
Add			SARASOTA, FL 34234
Remove			
2) Change	VP	MORROW, DANIEL	1234 OREGON LANE
Add			NORTH PORT, FL 34286
Remove			
3) Change	VP	STEPHENS, MATTHEW R	744 SUGARWOOD WAY
Add			VENICE, FL 34292
Remove		McCue, Eldon P.	
4) Change	VP	匿	5367 Densaw Rd.
✓ Add			NORTH PORT, FL 34287
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

ttach	nding or adding ad additional sheets, ij	f necessary).	(Be specific)			
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provis	mendment provide sions for implemen f not applicable, ind	ting the amend	nge, reclassific Iment if not co	cation, or cance ontained in the	llation of issued amendment itself	shares, [:
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.  3.30-2015	
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"  (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 San w Bulk	
(By a director, resident 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)	
GAN W. BUSE (Typed or printed name of person signing)	
President	
(Title of person signing)	