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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : TIMELINE BUSINESS CENTER LLC

Account Number: I20150000034

Phone

: (239)344-7417

Fax Number

: (888)344-7262

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

©EOR AMND/RESTATE/CORRECT OR O/D RESIGN CARVALHO STONE & TILE, INC.

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Corporate Filing Menu

Help

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| • | COVERLETTER | | | |
|---|---|--|--|--|
| TO: Amendment Sect Division of Corpo | = | | | |
| NAME OF CORPOR | CARVALH | | E, INC. | |
| DOCUMENT NUME | BER: <u>\$100001</u> | 7075 | · · · · · · · · · · · · · · · · · · · | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corre | spondence concerning this ma | tter to the following: | | |
| ISMAEL CARDOSO | | | | |
| | | Name of Contact Person | 1 | |
| | TIMELINE BUSIN | NESS CENTER | LLC | |
| | | Firm/ Company | | |
| | 8981 DANIELS C | ` • | 3 | |
| | | Address | | |
| | FORT MYERS, F | L 33912 | | |
| City/ State and Zip Code | | | | |
| ismael@timelinebusiness.com | | | | |
| | | sed for future annual report | notification) | |
| | | | | |
| For further information concerning this matter, please call: | | | | |
| ISMAEL CARDOSO | | at (239 | 344-7417 | |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check for the following amount made payable to the Florida Department 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) | |
| | | | Address | |
| Amendment Section | | Amendment Section | | |

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation

| | of | | |
|--|---|---|-----------------------------|
| | HO STONE & TI | | |
| (Name of Corporation as currently | rfiled with the Florida Dept P10000017071 | t, of State) | |
| (Document Number | of Corporation (if known) | | - |
| Pursuant to the provisions of section 607.1006, Flor ts Articles of Incorporation: | | fit Corporation adopts the following | ng amendment(s) (|
| L Kamending name, enter the new name of the | corporation: | | |
| | | | _The new |
| name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t | rp," "Inc," or "Co". A pro | my," or "incorporated" or the a ofessional corporation name must | ibbreviation contain the |
| 3. <u>Enter new principal office address, if applical</u> Principal office address <u>MUST BE A STREET A</u> | | | - |
| C. Enter new mailing address, if applicable: | | <u>25 :-</u> 4. | - 51 |
| (Mailing address <u>MAY BE A POST OFFICE I</u> | <u></u> | <u> </u> | FIL 48 24 |
| | | | |
| If amending the registered agent and/or registered agent and/or the new registered. | tered office address in Flori ed office address: | da. enter the name of the | 9:51 |
| Name of New Registered Agent | | | |
| | (Florida strees address) | | |
| New Registered Office Address: | | . Florida | _ |
| · | (City) | (Zip Code) | |
| New Registered Agent's Signature, if changing R hereby accept the appointment as registered agent | | ept the obligations of the position. | |
| Signature of | New Registered Agent, if cha | nging | |

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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 | PT | <u>Iohn Doe</u> | |
|-------------------------------|-----------|-------------------|---|
| X Remove | <u>v</u> | Mike Jones | |
| _X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change | D | MICHAEL P HALUNEN | 15092 TAURUS CIR |
| Add | | | PORT CHARLOTTE 3398 |
| Remove | | | |
| 2) Change | <u></u> | | |
| Add | | | *************************************** |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

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| | ts, if necessary). | cles, enter chang (Be specific) | | | |
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3/24/2015 8:34 AM FROM: 8883447262

TO: +18506176380 P. 7

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| The date of each amendment(s) a | deption: 03/24/2015 | , if other than the |
|--|---|---------------------|
| date this document was signed. | | |
| Effective date if applicable: 03/ | 24/2015 | |
| | (no more than 90 days after amendment file date) | |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were add by the shareholders was/were si | opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval. | |
| · · · · · · · · · · · · · · · · · · · | proved by the shareholders through voting groups. The following statement 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 | 77 | |
| | (voting group) | |
| The amendment(s) was/were add action was not required. | opted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/were adaction was not required. | opted by the incorporators without shareholder action and shareholder | |
| Dated 03/24/2 | 015 | |
| Dated | uco M. Combler | |
| selecte | lirector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary) | - |
| | MARCOS CARVALHO | |
| | (Typed or printed name of person signing) | |
| , | PRESIDENT | |
| | (Title of person signing) | |