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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:			

COR AMND/RESTATE/CORRECT OR O/D RESIGN NEW WORLD TILE, INC.

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORP	ORATION: NEW WORLD TIL	LE, INC.
DOCUMENT NU	MBER:P06000128302	
The enclosed Artici	les of Amendment and fee are sub	bmitted for filing.
Please return all con	respondence concerning this mat	tter to the following:
	ISMAEL CARDOSO	
	······································	Name of Contact Person
	TIMELINE BUSINESS CEN	TER LLC
	<u> </u>	Firm/ Company
	8971 DANIELS CENTER D	, ,
		Address
	FORT MYERS, FL 33912	
		City/ State and Zip Code
	tavinhoc@hotmail.com	
	E-mail address: (to be us	sed for future annual report notification)
For further informa	tion concerning this matter, pleas	se call:
	ne of Contact Person	Area Code & Daytime Telephone Number
	•	payable to the Florida Department of State:
S35 Filing Fee	Certificate of Status	Certified Copy (Additional copy is enclosed) \$\int_{\$
- 	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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Articles of Amendment to Articles of Incorporation

NEW WORLD TILE, INC.		
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P06000128302		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following	amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation." "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "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)		
	•	
		2 02(
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	1020 HOY -
Name of New Registered Agent		-2
		™ ∈
(Florida stre	et address)	5 7
New Registered Office Address:	, Florida	
	(Clty) (Zip C	oden
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		
Signature of New Re	gistered Agent, if changing	
Check if applicable		

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

Example:

To:

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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	<u>PT</u>	John Doe	
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	ALEXANDRE M LUZIA	8707 ATTIENA CR
X Add			LEHIGH ACRES, FL 33971
Remove			
2) Change			2
Add			<u></u>
Remove 3) Change			
Add	٠.	•	
Remove			
4) Change			
Add			
Remove		·.	
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

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amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)		
		
		
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		<u>-</u>
		
		AH 10: 12
		Ö
an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	÷.**	2
(if not applicable, indicate N/A)		
		

The date of each amendment(s) date this document was signed.	adoption:	_ if other th	nan the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)		
	(no more than 90 days after amenament file date)		
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date will n Department of State's records.	not be listed	as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and si	hareholder	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.		
must be separately provided j	approved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): ust for the amendment(s) was/were sufficient for approval	2020 NOV -2	
	(voting group)	1	
			m
10/28/20	20	A	(11)
Dated		AM 10: 1	U
Signature		· ~	
selec	director, president or other officer – if directors or officers have not been sted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)		
	OTAVIO CARNEIRO		
	(Typed or printed name of person signing)		
	DIRECTOR		
	(Title of person signing)		