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(((H15000103804 3)))



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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.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN TL CLEANING SERVICES INC

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850-617-6381

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April 29, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

TL CLEANING SERVICES INC 847 HYDRANGEA DR N FORT MYERS, FL 33903

SUBJECT: TL CLEANING SERVICES INC

REF: P10000052758

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You can't change to an LLC by filing an amendment. If you put LLC on the end in error, please correct your document. If you are trying to convertto an LLC you can't do it with an amendment. You must file a conversion.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carolyn Lewis Regulatory Specialist II FAX Aud. #: H15000103804 Letter Number: 915A00008737 TO: Amendment Section

(((H15000103804 3)))

COVER LETTER

Division of Corp	porations						
NAME OF CORPO	RATION: TL CLEANING S	ERVICES INC					
DOCUMENT NUM	D10000080750						
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.					
Please return all corre	espondence concerning this ma	tter to the following:					
	ISMAEL CARDOSO						
		Name of Contact Person	1				
	TIMELINE BUSINESS CENTER I.L.C						
		Firm/ Company					
	8981 DANIELS CENTER DR 208						
		Address					
	FORT MYERS, FL 33912						
	 :	City/ State and Zip Code	• · · · · · · · · · · · · · · · · · · ·				
isma	el@timelinebusiness.com						
	E-mail address: (to be us	sed for future annual report	notification)				
	,	•					
For further information	on concerning this matter, pleas	se call:					
ISMAEL CARDOSO)	at (239	344-7417				
Name of Contact Person		Area Co	de & Daytime Telephone Number				
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:				
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is challed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing Address		Street Address					
	endment Section		ment Section				
Div	rision of Corporations	Division of Corporations					
	. Box 6327	Clifton	Building				
Tallahassee, F1, 32314		2661 Executive Center Circle					

Tallahassee, FL 32301

15 APR 29 PM 12: 03

Articles of Amendment to

	Articles of Incorporation of
TL	CLEANING SERVICES INC
(Name of Corporat	tion as currently filed with the Florids Dent. of State)
	P10000052758
(Document)	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the c	orporation:
TMVC ENTERPRISES INC	The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" or the abbreviation p," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE Bo	230
	•
D. If amending the registered agent and/or registence new registered agent and/or the new registered	ered office address in Florida, enter the name of the
Name of New Registered Agent	
	•
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.	<u>ristered Agent:</u> I am familiar with and accept the obligations of the position.
Sigi	nature of New Registered Agent, if changing

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(((H150001038043)))

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	PT	John Du	œ.	
X Remove	<u>v</u>	Mike Jo	nes	
_X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				4 1 1 2 3 4 2 1 1 2 1 2 2 3 4 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4
2) Change		_		
Add			_	
Remove				
3) Change		_		
Add				
Remove				
4) Change		-		
Add				,
Remove				
5) Change				
Add				
Remove			•	
6) Change	·		 	
Add				<u></u>
Remove				

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	ng or adding additional Artle ditional sheets, if necessary).	(Be specific)	I DELE.		
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if an ame provision (if no	ndment provides for an excha is for implementing the amen I applicable, indicate N/A)	nge, reclassificatio	on, or cancellation ined in the amend	of issued shares, ment itself:	
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(((H150001038043))) SELFE FATE TO LEASE THE

	•	777			
The date of each amendment(s) ad	04/28/2015		15 APR 29	PH 12:	03 if other than the
date this document was signed.	νρικα				, ir omer dimi me
	8/2015				
Effective date if applicable:	(no more than 00.	days after amendmen	t file detal		
	(no more than 30 c	aiys after amenamen	i jue amej		
Note: If the date inserted in this be document's effective date on the De		ole statutory filing re-	quirements, this	date will r	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)				
☐ The amendment(s) was/were ado by the shareholders was/were suf		umber of votes cast fo	or the amendmen	nt(s)	
☐ The amendment(s) was/were app must be separately provided for				ment	
"The number of votes cast	for the amendment(s) was/were s	sufficient for approva	1		
by			_,"		
	(voting group)				
The amendment(s) was/were ado action was not required.	pted by the board of directors wi	ithout shareholder act	ion and shareho	lder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators withou	it shareholder action i	and shareholder		·
04/28/2015 Dated					
Signature					
solected	rector, president by other officer i, by an incorporator – if in the h ed fiduciary by that fiduciary)	ands of a receiver, tru	ers have not bee ustee, or other co	n urt	-
	TANL	A CARDOSO			
•	(Typed or printed nar	me of person signing)	1	 	
•	PR	RESIDENT			

(Title of person signing)