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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. 🕮

-	TFT:	a

Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN JOINVILLE ENTERPRISES INC

Certificate of Status	0
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Page Count	05
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TO: Amendment Section

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## **COVERLETTER**

Division of Corporations						
NAME OF CORPOR	ATION: JOINVILLE ENT	ERPRISES INC				
DOCUMENT NUMBER: P15000068962						
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this matter to the following:						
	ISMAEL CARDOSO					
-		Name of Contact Person	1			
	TIMELINE BUSINESS CENTER LLC					
-	Firm/ Company					
	8981 DANIELS CENTER DR# 208					
Address						
FORT MYERS, FL 33912						
City/ State and Zip Code						
ismae	@timelinbusiness.com					
E-mail address: (to be used for future annual report notification)						
	2-mat and ess. (to be tract to refute a man report not mention)					
For further information concerning this matter, please call:						
ISMAEL CARDOSO		at (				
Name o	f Contact Person	at (239 344-7417  Area Code & 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)			
Ame Divis P.O.	ing Address Indirect Section Indirect Se	Amend Divisio Clifton 2661 E	Address Iment Section In of Corporations Building Executive Center Circle ISSEE, FL 32301			

3

## Articles of Amendment

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" or "Incorporated" or the abbreviation issional corporation name must contain the ILER AVE# 201 ERS, FL 33916 ERS, FL 33916 ERS, FL 33916
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<b>V O O O O O O O O O O</b>
enter the name of the
9.
200
, Florida
enter the name of the

Р.

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 Doc X Remove ¥ Mike Jones \_X Add <u>sv</u> Sally Smith Type of Action <u>Title</u> Name <u>Addres</u>s (Check One) CLAYTON C NUNES D 1650 BATES CIR 1) \_\_\_\_ Change FORT MYERS, FL 33901 \_ Add Remove **EVERTON COUTINHO** D 14650 EAGLE RIDGE DR #144 2) \_\_\_\_ Change FORT MYERS, FL 33912 Add Х Remove 3 ) \_\_\_\_ Change \_\_ Add Remove 4) \_\_\_\_ Change \_Add Remove 5) \_\_\_\_ Change \_ Add Remove 6) \_\_\_\_ Change \_\_ Add \_\_\_ Remove

# 11/24/2015 11:29 AM FROM: 8883447262 TO: +18506176380 P. 5

•	(Be specific)
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an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s	11/24/2015 ) adoption:	, if other than the
date this document was signed.	, adoptions	, if Other chan the
Effective date if applicable:	1/24/2015	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will n Department of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were	adurated by the incorporators without shareholder action and shareholder	
action was not required.		
11724/2	015)	
Dated		
Signature (B)	:///	
Signature (Bx	a director, president or other officer - if directors or officers have not been	•
sele	cted, by an incorporator — if in the hands of a receiver, trustee, or other court	
арр	ninted (iduciary by that fiduciary)	
	GUNAR VEIGSDING JR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	