P1700067168

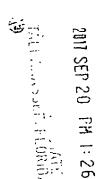
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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C. GOLDEN SEP 21 2017

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	DRATION: MAINE GLOBAL	. CORP	
	1BER:		
The enclosed Article	s of Amendment and fee are su	abmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	JESUS M QUINTERO		
		Name of Contact Person	n
		Firm/ Company	
	16860 SW 1st STREET		
		Address	
	PEMBROKE PINES, FL 33	027	
		City/ State and Zip Cod	e
dom	inicanepa@aol.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
JESUS M QUINTERO		305	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div	niling Address endment Section vision of Corporations D. Box 6327	Amend Divisio	Address ment Section of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2017 SEP 20 PM 1: 25

MAINE GLOBAL CORP		
(<u>Name</u>	of Corporation as currently filed with the	Florida Dept. of State) ASSUE, FLORIDA
P17000067168		G.
	(Document Number of Corporation (i	f known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Profit</i> (Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
TSL CORP.		The new
	ation "Corp," "Inc," or "Co". A profes	" or "incorporated" or the abbreviation sional corporation name must contain the
B. Enter new principal office address, (Principal office address MUST BE A S		***
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		
D. If amending the registered agent an new registered agent and/or the new	d/or registered office address in Florida, v registered office address:	enter the name of the
Name of New Registered Agent	JESUS M QUINTERO	
_ ·	16860 SW 1st STREET	-
	(Florida street address)	
New Registered Office Address:	PEMBROKE PINES	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	nanging Registered Agent: ered agent. I am familiar with and accept	the obligations of the position.

Signature of New Registered Agent, if changing

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
	_
£	
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
_	
Effective date if applicable: (no more	than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's recommendation.	e applicable statutory filing requirements, this date will not be listed as the ords.
Adoption of Amendment(s) (CHECK ON)	<u>E</u>)
■ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	rs. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehold must be separately provided for each voting group entities.	lers through voting groups. The following statement itled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) v	vas/were sufficient for approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of diaction was not required.	rectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporate action was not required.	ors without shareholder action and shareholder
Dated 9/13/17-	
Signature	NO
(By a director, president or oth	ner officer – if directors of officers have not been if in the hands of a receiver, trustee, or other court ductary)
MATEO DUQUE BO	TERO
(Typed or p	printed name of person signing)
PRESIDENT	
	(Title of person signing)

.