

P23000040544

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

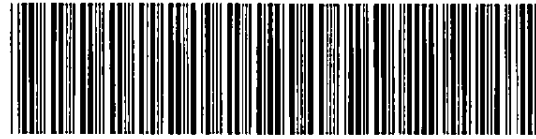
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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S. CHATHAM
MAY 23 2008

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 05/23/2023

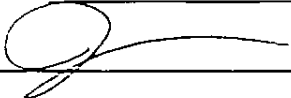
Name: Jennifer Bialowas

Reference #: 2007739

Entity Name: TIMEL VENTURES, INC.

- Articles of Incorporation/Authorization to Transact Business
- Domestication
 - Amendment
 - Change of Agent
 - Reinstatement
 - Conversion
 - Merger
 - Dissolution/Withdrawal
 - Fictitious Name
 - Other Upon filing please provide a certified copy
- file first*

Authorized Amount: 128.75

Signature: 

COVER LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: TIMEL VENTURES, INC.

Enclosed is an original and one (1) copy of the Articles of Domestication and a check:

FEES:

Certificate of Domestication	\$ 50.00
Articles of Incorporation and Certified Copy	\$ 78.75
Total filing fee	\$128.75

OPTIONAL:

Certificate of Status	\$ 8.75
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From: Christina Mermigas

Name (printed or typed)

120 S RIVERSIDE PLZ STE 1700

Address

Chicago, IL 60606

City, State & Zip

312-855-4354

Daytime Telephone Number

cmermigas@chuhak.com

E-mail address: (to be used for future annual report notification)

Articles of Domestication
Foreign Corporation Domesticating to Florida

The undersigned, TIMOTHY J MCINTYRE, PRESIDENT
(Name) (Title)

of TIMEL VENTURES, INC., a foreign
corporation, in accordance with s. 607.11922, Florida Statutes, submit these Articles of
Domestication.

1. Then name of the domesticating corporation is TIMEL VENTURES, INC.
(Foreign Corporation)

2. The jurisdiction and date of its formation is Illinois / May 25, 2005

3. The name of the domesticated corporation is _____
TIMEL VENTURES, INC.

4. The jurisdiction of formation of the domesticated corporation is **Florida**

5. The domestication corporation is a foreign corporation and the domestication was
approved in accordance with its organic law.

6. Attached are Florida Articles of Incorporation to complete the domestication
requirements pursuant to s.607.0202, F.S.

I certify I am authorized to sign these Articles of Domestication on behalf of the corporation.

T.J. McIntyre
(Authorized Signature)

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FILED

ARTICLES OF INCORPORATION
IN COMPLIANCE WITH CHAPTER 607, F.S.

ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE:

TIMEL VENTURES, INC.

ARTICLE II PRINCIPAL OFFICE

THE PRINCIPAL PLACE OF BUSINESS/MAILING ADDRESS IS:

Principal Address
1520 Clermont Drive, Bldg, H-301

Naples Florida 34109

Mailing Address
1520 Clermont Drive, Bldg, H-301

Naples Florida 34109

ARTICLE III PURPOSE

THE PURPOSE FOR WHICH THE CORPORATION IS ORGANIZED:

ARTICLE IV SHARES

THE NUMBER OF SHARES OF STOCK IS: 100,000 authorized; 1,000 issued

ARTICLE VI REGISTERED AGENT AND STREET ADDRESS

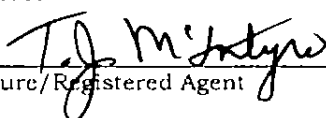
THE NAME AND FLORIDA STREET ADDRESS (P.O. BOX NOT ACCEPTABLE) OF THE REGISTERED AGENT IS:

Timothy J. McIntyre

1520 Clermont Drive, Bldg, H-301

Naples Florida 34109

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I AM FAMILIAR WITH AND ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.


Signature/Registered Agent

5/16/23
Date

2023 MAY 23 PM 3:52

5/16/23

ARTICLE V DIRECTORS AND/ OR OFFICERS

THE NAME(S) AND ADDRESS(ES) AND SPECIFIC TITLES:

Name & Title: Timothy J. McIntyre, President
Address: President/Director
1520 Clermont Drive, Bldg, H-301
Naples Florida 34109

Name & Title: Elaine M. McIntyre
Address: Sec/Treas/Director
1520 Clermont Drive, Bldg, H-301
Naples Florida 34109

Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

Name & Title: _____
Address: _____

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I submit this document and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155.F.S.

T.J. McIntyre
Signature/Authorized Person

5/16/23
Date