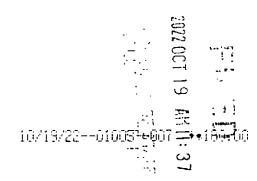
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	·- · · · ·	ORATION			
DOCUMENT NUM	BER: N10000006260				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Pedro Rivera				
	Name of Contact Person				
	tymision				
		Firm/ Company			
	3201 Budinger Ave				
	Address				
	Saint Cloud, FL 34769				
	City/ State and Zip Code				
	E-mail address: (to be us	sed for future annual report	notification)		
	`	·			
For further information	on concerning this matter, pleas	se call:			
Pedro Rivera		at ( <sup>407</sup>	350-2556 de & Daytime Telephone Number		
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	artment of State:		
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Am Div P.C	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314	Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

## Articles of Amendment to Articles of Incorporation of



TVMISION CORPORATION (Name of Corporation as currently filed with the Florida Dept. of State) N10000006260 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A professional corporation name must contain the word "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) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent \_ (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 PΤ John Doe X Remove $\overline{\Lambda}$ Mike Jones <u>X</u> Add <u>SV</u> Sally Smith Title Address Type of Action <u>Name</u> (Check One) Pedro A Rivera PhD 3201 Budinger Ave 1) X Change Saint Cloud FL 34769 \_\_\_\_ Add \_\_\_\_ Remove 2641 Dixie Ln VΡ Blanca E Rivera 2) \_\_\_\_ Change Kissimmee FL 34744 \_\_\_ Add Remove Edgar Del Valle \_ Change 2641 Dixie Ln \_\_ Add KIssimmee FL 34744 Remove Jose A Rivera 4) \_\_\_\_ Change 3201 Budinger Ave \_\_\_\_\_ Add Saint Cloud FL 34769 Remove 9239 Hoenstine Ave VP Jose F Nolasco Gil 5) \_\_\_\_ Change Orlando FL 32824 \_\_ Add Remove 1214 INGRAM ST Edwin Perez Vazquez \_\_\_\_ Change KISSIMMEE FL 34744 Add Remove

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			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	Address		
1) Change	SVP	Ramon Hernandez	512 NOVA DR		
X Add			DAVENPORT FL 33837		
Remove					
2) Change	<u>S</u>	Florencio MOUSE SAEZ	4510 CALADIUM CT		
XAdd			Kissimmee FL 34758		
Remove 3) Change					
Add					
Remove					
4) Change		<del></del>			
Add			<del></del>		
Remove			·		
5) Change		_			
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)	
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f an amendment provides for an exc	nange reclassification or cancell	ation of issued shares
provisions for implementing the amo	endment if not contained in the a	mendment itself:
(if not applicable, indicate N/A)		<del></del>
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у по аррисате, такчи пол		

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	adopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s' sufficient for approval.	I
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
hy	· · · · · · · · · · · · · · · · · · ·	
	(voting group)	
10/18/20 Dated 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)	
	PEDRO A RIVERA PhD	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	