## P1100000474e54

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DIVISION OF CORRORATE

AUG OG 2018 C NICHAIR

## **COVER LETTER**

ELVISION OF CORPORATION .

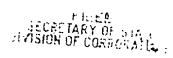
TO: Amendment Section Division of Corporations

2011 JUL 30 AM 11: 32

NAME OF CORPORATION: S L VIDEO COM	PUTER REPAIR & MORE	INC
DOCUMENT NUMBER: P11000047654		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
MIGUEL M MENDOZA		
<del></del>	Name of Contact Person	1
	Firm/ Company	
1139 TIMBERBEND CIRCL	_E	
	Address	
ORLANDO, FLORIDA, 328	24	
	City/ State and Zip Cod	c c
mgmendo@aol.com		
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
Miguel M Mendoza	at (	538-7487
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made j	payable to the Florida Depa	irtment of State:
■ \$35 Filing Fee	□\$43.75 Fiting Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



s I video computer repair & more inc

2010 JUL 30 AN II: 32

( <u>Name</u>	of Corporation as currently	filed with the Florida Dept. of State)
P11000047654		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
	iation "Corp." "Inc." or "C	The new
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		
D. If amending the registered agent ar new registered agent and/or the ne		ess in Florida, enter the name of the
Name of New Registered Agent	VICTORIA C. MONTALV	O
	7078 VISTA PARK BLVD	
	(Florida stre	et address)
New Registered Office Address;	ORLANDO	Florida 32829
	(	City) (Zip Code)
New Registered Agent's Signature, if e I hereby accept the appointment as regist	hanging Registered Agent: vered agent. I am familiar w	ith and accept the obligations of the position.
	Signature of New Po	or orad Soont 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:	ve, ana sa	ay 3man, 3v as an Aaa.	
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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	LUISA MARTINEZ	20 W LUCERNE CIR. APT 716
Add			ORLANDO, FL.32801
X Remove			
2) Change	l,	VICTORIA C. MONTALVO	7078 VISTA PARK BLVD
X Add			ORLANDO, FL. 32829
Remove			
3) Change	<u></u>	WALTER O. MONTALVO	7078 VISTA PARK BLVD
XAdd			ORLANDO, FL. 32829
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ecessary). (Be sp	ter change(s) here: pecific)		
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	<u>or an exchange, re</u>	<u>eclassification, or ca</u>	ncellation of issued	<u>sh</u> ares,
f an amendment provides f	4	if not contained in	the amendment itsel	<u>f:</u>
provisions for implementin	ig the amendment			
f an amendment provides for provisions for implementing (if not applicable, indice	ig the amendment ate N/A)			
provisions for implementin	ig the amendment are N/A)			
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If an amendment provides for provisions for implementing (if not applicable, indicalled)	g the amendment ate N/A)			
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provisions for implementin	g the amendment ate N/A)			
provisions for implementin	g the amendment ate N/A)			

The date of each amendment(s) adoption this document was signed.	otion:	, if other than the
Effective date <u>if applicable</u> :		
meetive date ir applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blod document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date ritment of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.	
	ved by the shareholders through voting groups. The following statement ch voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
Dated <u>67/2</u> Signature	uisa fartus	
(By a dire selected, l	ctor, president or other officer – if directors or officers have not been by an incorporator —if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
Ĺţ	JISA MARTINEZ	
_	(Typed or printed name of person signing)	
PI	RESIDENT	
	(Title of person signing)	