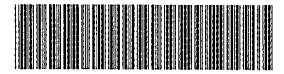
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ROMEO'S CABL	E SERVICES INC	
DOCUMENT NUM	P17000036200		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	OSIRIS HIDALGO		
		Name of Contact Person	1
	ROMEO'S CABLE SERVIC	CES INC	
		Firm/ Company	
	15261 HARROWGATE WA	ıΥ	
		Address	
	WINTER GARDEN, FL 347	787	
		City/ State and Zip Cod	e
	OSIRITO@GMAIL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
OSIRIS HIDALGO		at (346 - 3731
Name of Contact Person		Area Code & 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	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address			Address
Amendment Section		Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ROMEO'S CABLE SERVICES INC.

(Name o	of Corporation as currently	filed with the Florida Dept. of State)	
17000036200		, mad with the Florida beparence,	
	(Document Number of	Corporation (if known)	· · · · · · · · · · · · · · · · · · ·
rsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this i	Florida Profit Corporation adopts the following	ig amendment(:
. If amending name, enter the new n.	ame of the corporation:		
	Corp." "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation professional corporation name must contain	
Enter new principal office address, Principal office address MUST BE A S		N/A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	2021.
. If amending the registered agent ar			<u> </u>
new registered agent and/or the new		<u>.</u>	5
Name of New Registered Agent	N/A		2: 23
	(Florida stre	vet address)	-
	N/A	, Florida	
New Registered Office Address:			

☐ 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)

Example:

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.

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>v</u>	DARIANA HIDALGO	15261 HARROWGATE WAY
X Add			WINTER GARDEN, FL 34787
Remove			
2) Change	 		
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	
	· .
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
N/A	
	· · ·
	.

The date of each amendment(s) a date this document was signed.	doption:	, 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 E	block does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac action was not required.	opted by the incorporators, or board of directors without shareholde	r action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes east for the amenda ufficient for approval.	nent(s)
	proved by the shareholders through voting groups. The following streach voting group entitled to vote separately on the amendment(s).	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by OSIRIS HIDALGO		
	(voting group)	
07/22/202 Dated Signature	Sins Hilds	
	firector, president or other officer – if directors or officers have not l	
	ed, by an incorporator — if in the hands of a receiver, trustee, or other ited fiduciary by that fiduciary)	court
	OSIRIS HIDALGO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	