Office Use Only



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R. WHILE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: LONDON EXPRESS INTERNATIONAL II, INC.
DOCUMENT NUMBER: P02000035869

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CRISTINA CROW

Name of Contact Person

LONDON EXPRESS INTERNATIONAL INC

Firm/ Company

2750 MICHIGAN AVE, SUITE B-2

Address

KISSIMMEE, FLORIDA 34744

City/ State and Zip Code

LONDON2750@HOTMAIL.COM

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

For further information concerning this matter, please call:

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377-6175

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FY LATE 15 APR 13 AM U: 45

LONDON EXPRESS INTERNATIONAL II, INC

STUNE LANT GESTATE HALLAHASSEE, FLORIDA

(Name of Corporation as currently filed with the Flo	rida Dept. of State)
P02000035869	**
(Document Number of Corporation (if I	nown)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Statutes, the Florid	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	o". A professional corporation name must contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	

Name of New Registered Agent

(Florida street address)

New Registered Office Address: , Florida

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

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

(City)

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>	<u>Name</u>	<u>Addres</u> s
1) Change	s	MONICA HERNADEZ	2964 CLIPPER COVE LANI
Add			APT#101
Remove			KISSIMMEE,FL 34741
2) Change	D	CARLOS LONDON	2750 MICHIGAN AVE
Add			SUITE B-2
Remove			KISSIMMEE, FL 34744
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	·		
∧dd			
Remove			
6) Change	<u></u>		
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
titudii dadiinondi oneeda, ij needasaryy.	(be specific)
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	idment if not contained in the amenument itself:
(3 approvious maissas mais	
(g approunts manual (1771)	
(g approuded mandate (17/1)	
(g spyriodolo, malodic (17/1)	
(g sppnouois; maisaic (v/A)	
(g sppnouote; mateure (17/1)	
(g spp.nouolo, maloute (17/1)	
(g spp.nouote, maistait (17/1)	
(g spp.nouolo, maloute 11/A)	
(g spp.nouolo, maioute 11/A)	
(y spp. router, markett (r/A)	
(y spp. router, markett (r/A)	
(y spp. route, market (r/A)	

date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
CRISTINA CROW	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	