

P05000050198

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

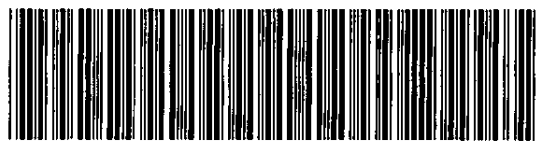
(Business Entity Name)

(Document Number)

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10/26/09--01051--002 **35.00

Amend

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 OCT 26 AM 9:09

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: R.U QUALITY FLOORS,INC

DOCUMENT NUMBER: P05000050198

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

Please return all correspondence concerning this matter to the following:

CARLOS LONDON

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:

CARLOS LONDON

Name of Contact Person

at (321) 377-6175

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

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(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

A. If amending name, enter the new name of the corporation:

(Principal office address MUST BE A STREET ADDRESS)

(Mailing address MAY BE A POST OFFICE BOX)

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

_____, Florida.

(City)

(Zip Code)

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Page 1 of 3

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>V.P</u>	<u>CHEITZA M.ALVAREZ</u>	<u>2750 MICHIGAN AVE</u> <u>SUITE B-2</u> <u>KISSIMMEE.FLORIDA34744</u>	☒ Add ☐ Remove
<u>_____</u>	<u>_____</u>	<u>_____</u> <u>_____</u> <u>_____</u>	☐ Add ☐ Remove
<u>_____</u>	<u>_____</u>	<u>_____</u> <u>_____</u> <u>_____</u>	☐ Add ☐ Remove

(attach additional sheets, if necessary). (Be specific)

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 10/05/2009
(date of adoption is required)
Effective date if applicable: INMIDIATLY
(no more than 90 days after amendment file date)

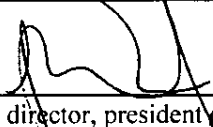
Adoption of Amendment(s) (CHECK ONE)

- ☐ 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.

Dated 10/05/2009

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)

RODRIGO URIBE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)