P16000056545

(Requestor's Name)				
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(City/State/2:p/Fittine #)				
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(Business Entity Name)				
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MPR HOME REMODELING 1 CORP						
DOCUMENT NUMBER: P16000056545						
The enclosed Articles of Amendment and fee are sub	omitted for filing.					
Please return all correspondence concerning this matter to the following:						
CARLOS LONDON						
Name of Contact Person						
LONDON EXPRESS INTER	NATIONAL INC					
	Firm/ Company					
2750 MICHIGAN AVE, SUI	2750 MICHIGAN AVE, SUITE B-2					
	Address					
KISSIMMEE, FLORIDA 34744						
	City/ State and Zip Code					
LONDON2750@HOTMAIL.COM						
E-mail address: (to be us	ed for future annual report	notification)				
For further information concerning this matter, please call:						
CARLOS LONDON	at (
Name of Contact Person	Area Co	de & 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 & 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 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assec, FL 32301				

Articles of Amendment to Articles of Incorporation of

MPR HOME REMODELING I CORP

(Name of Corpora	ion as currently filed with the Florida Dept. of State)
216000056545	ion as currently filed with the Florida Dept. of State)
(Docu	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Flori ts Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the	orporation:
	The new
	d "corporation," "company," or "incorporated" or the abbreviation," "Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
3. <u>Enter new principal office address, if applicab</u> Principal office address <u>MUST BE A STREET AD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B.	X)
•	
	· · · · · · · · · · · · · · · · · · ·
If amending the registered agent and/or registered new registered agent and/or the new registered.	red office address in Florida, enter the name of the
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Re	istered Agent
	I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, 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)

Remove

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		JUAN PEREZ QUINTANA	3480 OAK DR
XXX Add				KISSIMMEE, FLORIDA
Remove				34746
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				<u></u>
Remove				
5) Change				
Add		_		
Remove				<u>:</u>
6) Change		_		
Add				



E. <u>If amending or adding additional Arti</u>	cles, enter change(:	s) here:	•	- ,
(Attach additional sheets, if necessary).	(Be specific)			
			•	
AT ARE ARRIVANCE OF THE STATE OF	TO TO LOCATION		 	
WE ARE ADDING MR. JUAN PEREZ QI	JINTANA AS DIRI	ECTOR		
				 .
			·	
	,			
		·		
		49 .9		
 If an amendment provides for an exch provisions for implementing the amer 				
(if not applicable, indicate N/A)				
				
		•		
		,		
			<u> </u>	
		<u> </u>		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	s date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ent(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stamust be separately provided for each voting group entitled to vote separately on the amendment(s):	lement
"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.	oolder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	r .
09/01/2016	
Signature Marche Pers	
(By a director, president or other officer – if directors or officers have not b selected, by an incorporator – if in the hands of a receiver, trustee, or other	
appointed fiduciary by that fiduciary)	
MANOLO PEREZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	