(Re	questor's Name)			
(Ad	dress)			
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Amend

JUL 2 6 2019 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION: J & Y GENERAL	SERVICES INC	
DOCUMENT NUM	BER: P19000052257		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	CARLOS LONDON		
		Name of Contact Persor	1
	LONDON EXPRESS INTER	RNATIONAL INC	
		Firm/ Company	
	2750 MICHIGAN AVE		
		Address	
	KISSIMMEE, FLORIDA 34	744	
		City/ State and Zip Code	e
LON	DON'2750@HOTMAH CON	1	
LON	DON2750@HOTMAIL.COM	sed for future annual report	notification)
	is-man address, (to be di	sed for fathre annual report	notricutory
For further informatio	on concerning this matter, pleas	se call:	
CARLOS LONDON		at (³²¹	de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	nrtment of State:
S35 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)
Am	iling Address endment Section ision of Corporations	Amend	Address Iment Section on of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

J&Y GENERAL SERVICES INC

The new	·	
tatutes, this Florida Profit Corporation adopts the following amendment(s) to a constitution: The new	Pursuant to the provisions of section 607,1006, Florida Statistics of Incorporation:	
oration:The new	its Articles of Incorporation:	
The new	A. If amending name, enter the new name of the corpo	
" " " " " " " " " " " " " " " " " " "		
"Inc," or "Co". A professional corporation name must contain the	name must be distinguishable and contain the word " "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb	
3038 MORTON WAY		
ESS) KISSIMMEE, FLORIDA 34743	B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	
2		
19		
	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
•		
2:		
l office address in Florida, enter the name of the	D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
	Name of New Registered Agent	
(Florida street address)		
. Florida	Now Ranis torned Officer Addience	
(City) (Zip Cade)	New Registerea Office Address.	
. Florida	Name of New Registered Agent New Registered Office Address:	

D 1 6 4

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 Do	<u>oe</u>	•
X Remove	<u>V</u>	Mike_Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		. <u> </u>
Add				
Remove				
2) Change				· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
3)Change		<u></u>		
Add				
Remove				
4) Change				<u> </u>
Add				, , , , , , , , , , , , , , , , , , ,
Remove				<u></u>
5) Change		_		<u>.</u>
Add				
Remove				
6) Change				
Add				<u> </u>
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
			.,	
		·		
	 -			
			· · · · · · · · · · · · · · · · · · ·	
•				
lf an amendment provides for an excl	nange reclassification.	or cancellation of iss	ued shares,	
provisions for implementing the ame	ndment if not containe	d in the amendment	itself:	
(if not applicable, indicate N/A)				

	07/15/2019	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
-	NMIDIATLY	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	1
"The number of votes co	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voling group)	•
☐ The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	•
07/15/20 Dated	19	•
	a director, president or other officer – if directors or officers have not been	·
selec	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	JUANA ALEQUIN PEREA	
	(Typed or printed name of person signing)	
	PRESIDENT	•
	(Title of person signing)	 -
		5