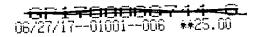
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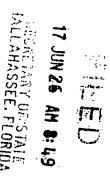
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COVER LETTER

TO: Registration Se Division of Cor			
BIRDIE SU	PPLY USA LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	CARLOS VALLEJO ROM	MERO	
		Name of Person	
		Firm/Company	
92 SW 3rd St APT 2905			
		Address	
,	Miami, Fl 33130		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information c	oncerning this matter, please ca	all:	
CARLOS VALLEJO RO	OMERO	786 304-4981 Area Code Daytime	
Name o	f Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		•
\$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BIRDIE SUPPLY USA LLC		
(Name of the Limited	Liability Company as it now appears on our records.) A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	bility Company were filed on 03/07/2017	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t	the limited liability company here:	
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applical	ble:	<u> </u>
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>OX)</u>	17 JUN 26
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered office address on our records, <u>en</u>	tes the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Francisco (1)	
	Enter Florida street address	
·	, Florid:	Zip Code
	City	esp coue

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CARLOS VALLEJO ROMERO	7950 NW 53RD STREET	Add
		MIAMI, FL 33166	□ Remove
	•	USA	⊟ Change
MGR	ESTHER DIAZ SOLORZANO	7950 NW 53RD STREET	
	•	MIAMI, FL 33166	□ Remove
		USA	E Change
			· Add
			□ Remove
			□ Change
·		******	
			Remove
			AHANNE Dange
			Remove
		•	☐ Change
			□ Add
•			□ Remove
			☐ Change

D: If amending any other	information, enter ch	ange(s) here: <i>(A</i>	ttach additional she	ets, if necessary.)	
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				OF'S E. FLO	金町
E. Effective date, if other (If an effective date is listed, the Note: If the date inserted document's effective date	te date must be specific and of in this block does not me	cannot be prior to date eet the applicable s	e of filing or more than 9 tatutory filing require	(optional); 0 days after filing IPurs	to 605.0207 (3)(b) not be listed as the
If the record specifies a (b) The 90th day after		ate, but not an	effective time, at	12:01 a.m. on t	he earlier of:
Dated	······································	2017	- .		
		Vall of			
	Signature of a m	ember or authorized	representative of a mem	ber	
CARLOS VA	LLEJO ROMERO				
	,	Typed or printed nan	ne of signee		