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COVER LETTER

TO: Amendment Section ' Division of Corporations

NAME OF CORPO	DRATION:	Bircon, Inc.	
			
DOCUMENT NUM	1BER:	P08000004304	
The enclosed Article	es of Amendment and fee a	are submitted for filing.	
Please return all corr	respondence concerning th	is matter to the following:	
	R	aymond McNemar	
		Name of Contact Person	
_	Tailored	Accounting Services, Inc.	
		Firm/ Company	
/	77	38 Gibsonton Drive	·
	A Lot square	Address State Control of the Control	
		ibsonton, FL 33534	<u> </u>
		FailoredAccounting.com	
		ed for future annual report notification)	<u></u>
For further informat	ion concerning this matter,	, please call:	
Bi	lly David Lott	at (813) 2 Area Code & Daytime Te	99-8188
Name o	f Contact Person	Area Code & Daytime Te	lephone Number
Enclosed is a check	for the following amount r	nade payable to the Florida Depar	rtment 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 Add Amendment Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	le

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

of

В	ircon Inc	09 _{Jl}	M 15 PM 3: 49
(Name of Corporation as curr	ently filed with the Florid	da Dept. of State)	13 PM 3: 40
P08	3000004304		*9
(Document Nur	mber of Corporation (if known	own)	
ursuant to the provisions of section 607.100 mendment(s) to its Articles of Incorporation:	06, Florida Statutes, this I	Florida Profit Corporation	adopts the following
. If amending name, enter the new name o	of the corporation:		
			The new
ame must be distinguishable and contain bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "pro	e designation "Corp," "In	c," or "Co". A professio	nal corporation
. Enter new principal office address, if app	olicable:	<u></u>	
Principal office address <u>MUST BE A STREI</u>	ET ADDRESS)		
	<u></u>		
. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			
(Maning quaress MAT BEATOST OFF)	<u>CE BOA</u>)		
		<u></u>	
			
. If amending the registered agent and/or	registered office address	in Florida, enter the nam	e of the
new registered agent and/or the new regi			
Name of New Registered Agent:			
wame of New Registered Agent.			
New Registered Office Address:	(Florida street	address)	
	(5 75 75 75 75 75 75 75 75 75 75 75 75 75		
		, Florida	
	(City)	(Zip Code)	
ew Registered Agent's Signature, if changi	ng Registered Agent:		

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
Pres	Cindy Guajardo-Meza	5401 Cafrey Place Apollo Beach, FL 33572	☑ Add □ Remove
Sec	Christian Danielle Lott	5401 Cafrey Place Apollo Beach, FL 33572	☑ Add □ Remove
Tres	Danielle Meza	5401 Cafrey Place Apollo Beach, FL 33572	☑ Add □ Remove
(attach a	ding or adding additional Articles, e dditional sheets, if necessary). (Be s	nter change(s) here:	
<u>provisi</u>	mendment provides for an exchange ons for implementing the amendment of applicable, indicate N/A)		

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)

<u>Title</u>	Name	Address	Type of Action
Pres	Billy David Lott	5401 Cafrey Place Apollo Beach, FL 33572	☐ Add ☐ Remove
<u>VP</u>	Billy David Lott	5401 Cafrey Place Apollo Beach, FL 33572	
(attach a	dditional sheets, if necessary). (Be	specific)	
provisi		e, reclassification, or cancellation of ent if not contained in the amendmen	

The date of each amendment(s) adoption: 06/01/2009 (date of adoption is required)		
· Effective date <u>if applicable</u> :	06/01/2009	(date of adoption is required)
	(no more than s	00 days after amendment file date)
Adoption of Amendment(s)	(CF	IECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		ne shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	dment(s) was/were sufficient for approval
by		,"
<u> </u>	(voting group)	
action was not required.		board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder
action was not required.	ne adopted by the	ancorporators without snarcholder action and snarcholder
Dated_06/1	1/2009	
Signature	Buyl 2) T
		dent or other officer – if directors or officers have not been
	oointed fiduciary	porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		Billy David Lott
	(Ту	ped or printed name of person signing)
		President
	(Title o	f person signing)