P17000054023

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TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: AIRSPRINGS DIRECT INC DOCUMENT NUMBER: P17000054023 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: VIRGINIA BELLAMY Name of Contact Person CHAWLA & CHAWLA, PC Firm/ Company 438 N. FREDERICK AVE SUITE 400 Address GAITHERSBURG MD-20877 City/ State and Zip Code VBELLAMY@CANDCCPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (301 490-0010 Area Code & Daytime Telephone Number RASNAIN CHADHA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

AIRSPRINGS DIRECT INC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P17000054023	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation: AUTO BUFFY INC.	The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
3. Enter new principal office address, if applicable:	501-SE 2ND ST APT 507
Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE FL 33301
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	501 SE 2ND ST APT 507
	FORT LAUDERDALE FL 33301
 If amending the registered agent and/or registered office admension registered agent and/or the new registered office address 	dress in Florida, enter the name of the
new registered agent and/or the new registered office address	dress in Florida, enter the name of the
new registered agent and/or the new registered office address	dress in Florida, enter the name of the
new registered agent and/or the new registered office address	dress in Florida, enter the name of the
new registered agent and/or the new registered office address Name of New Registered Ayent (Florida s	dress in Florida, enter the name of the ss: treet address) Florida
new registered agent and/or the new registered office address	dress in Florida, enter the name of the ss: treet address) Florida
new registered agent and/or the new registered office address Name of New Registered Ayent (Florida s	dress in Florida, enter the name of the ss: treet address) Florida
new registered agent and/or the new registered office address Name of New Registered Agent (Florida s New Registered Office Address:	dress in Florida, enter the name of the is: iron address) (Cay) Florida (Zip Code)
new registered agent and/or the new registered office address Name of New Registered Ayent (Florida s	dress in Florida, enter the name of the ss: trees address) (Cay) Florida (Zip Code)
new registered agent and/or the new registered office address Name of New Registered Agent (Florida's New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent	dress in Florida, enter the name of the ss: trees address) (Cay) (Cay) (Parida (Ap Code) H
new registered agent and/or the new registered office address Name of New Registered Agent (Florida's New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent	dress in Florida, enter the name of the ss: trees address) (Cay) Florida (Zip Coda)

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>P1</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	HARDEEP S CHADHA	3.370 N.E. 190TH ST#215
Add			AVENTURA FL 33180
X Remove			
2) Change	VP	TARANBIR KAUR	3370 NE 190TH ST 215
Add			AVENTURA FL 33180
X Remove 3) X Change	P.	CHETAN'S CHADHA	9411 NEWBRIDGE DR
Add			POTOMAC MD 20854
Remove 4) Change	VP	RASNAIN K CHADHA	9411 NEWBRIDGE DR
X Add			POTOMAC MD 20854
Remove 5) Change			16 7
Add			
Remove 6) Change			
Add			
Remove			

	al sheets, if necessary). (Be specific)	
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11 an amenume	nt provides for an exchange, reclassification, or cancellation of issued s implementing the amendment if not contained in the amendment itsel	6.
provisions for	licable, indicate N/A)	<u>!:</u>
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The date of each amendment(s)	AUGUST 15TH 2019	, if other than the
date this document was signed.		
All Effective date if applicable:	IGUST 15TH 2019	
	tno more than 90 days after amendment file date)	-
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this department of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were accion was not required.	dopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ac by the shareholders was were	lopted by the shareholders. The number of votes east for the amendment for approval.	ent(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	tement
The number of votes cas	Tor the amendment(s) was/were sufficient for approval	
by	(voting group)	
08/15/201	ŋ	
Dated		
Signature	director, president or other officer - if directors or officers have not be	
select	ed, by an incorporator - if in the hands of a receiver, trustee, or other onted fiduciary by that fiduciary)	
	Chetan Chadha	
	(Typed or printed name of person signing)	2
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	(Title of person signing)	
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