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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: BIRD ROAD AU	TO SERVICES, INC	
DOCUMENT NUM	BER:		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	LEE KONSKER		
		Name of Contact Person	n
		Firm/ Company	
	366 MOHAWK LANE		
		Address	
	BOCA RATON, FLORIDA	33487	
		City/ State and Zip Cod	e
aam	co20215@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio Lee Konsker	on concerning this matter, pleas	561	451-5882
Name	of Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made		•
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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

BIRD ROAD AUTO SERVICES, INC.

BIND NOND AUTO SERVICES, INC	
(Name of Corporation as currently filed with the Flor	rida Dept. of State)
P19000063002	
(Document Number of Corporation (if known	wn)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corpo</i> its Articles of Incorporation:	pration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "company," or "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professiona word "chartered," "professional association," or the abbreviation "P.A."	"incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2019 IALL
D. If amending the registered agent and/or registered office address in Florida, enter	
new registered agent and/or the new registered office address:	PH I
Name of New Registered Agent	<u> </u>
	37
(Florida street uddress)	
New Registered Office Address:	. Florida
(City)	(Zip Code)
•	
Now Begins and America Cinness of the control Device of America	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the oi	bligations of the position.
Signature of New Registered Agent, if ch	anging

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.

X Change	<u>PT</u>	John Do	<u>e</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	<u>Addres</u> s
1) Change	<u> </u>		ROGELIO LOPEZ	8510 SW 97TH ROAD
X Add				Miami, FL 33173
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				·
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				-
δ) Change		_		
Add				
Remove				

E. If amending or adding additional Articl (Attach additional sheets, if necessary).	les, enter change(s) f (Be specific)	<u>iere</u> :		
N/A	()			
		<u> </u>		
				
	-			_
				·
	 .		<u>_</u>	
		_	<u> </u>	<u>-</u>
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				_
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-				 _
F. If an amandment provides for an auchon		11 .1		
F. If an amendment provides for an exchan provisions for implementing the amend	ment if not containe	d in the amendmen	nt itself:	
(if not applicable, indicate N/A) Stock Redistribution:				
		_		
- Lee Konsker, President & Register Age	∍nt (50%) 		_	
- Rogelio Lopez, Vice President (50%)				
				·
	· · · · · · · · · · · · · · · · · · ·		<u> </u>	·
				
-				
				-

	November 11, 2019	
The date of each amendment(s) date this document was signed.	doption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast afficient for approval.	for the amendment(s)
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. To each voting group entitled to vote separately on the	he following statement amendment(s);
	for the amendment(s) was/were sufficient for approv	al
by	(voting group)	
	(voting group)	_
	opted by the board of directors without shareholder ac	tion and shareholder
action was not required.	opted by the incorporators without shareholder action	and shareholder
Signature	~11-120191	
selecte	irector, president or other officer – if directors or offi d. by an incorporator – if in the hands of a receiver, tr ted fiduciary by that fiduciary)	cers have not been ustee, or other court
	Lee Konsker	
	(Typed or printed name of person signing)
	President/	
	(Title of person signing)	-

. . . .