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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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11/19/24--01030--028 **25.00

11/18/24--01030--029 **10.00

STATE OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORI	PORATION: BAILEY AUTO T	RANSPORT, INC		
	MBER: P22000024188			
The enclosed Artic	eles of Amendment and fee are su	bmitted for filing.		
Please return all co	orrespondence concerning this ma	tter to the following:		
	SEBASTIAN BERDYCHOV	VSKI		
	TAXCARE GROUP	Name of Contact Persor	1	
	 ·	Firm/ Company		
	1377 CURTIS DR E	, and Junquing		
		Address		
	CLEARWATER, FL 33764			
		City/ State and Zip Cod	e	
	SBERDYCH@GMAIL.COM	A		
	E-mail address: (to be us	sed for future annual report	notification)	
	ation concerning this matter, pleas		245 4450	
SEBASTIAN BERDYCHOWSKI		at ()	
Name of Contact Person		Area Co	de & Daytime Telephone Nui	nber
Enclosed is a chec	k for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	E □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status	
1 1	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Amend Division The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	TANK AND

Articles of Amendment to Articles of Incorporation of

BAILEY AUTO TRANSPORT, INC

(Name of Corporation as current	ly filed with the Florida Dept. of State)		
P22000024188			
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation 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," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word		
B. Enter new principal office address, if applicable:	2164 NEBULA WAY		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	401		
	W MELBOURNE, FL 32907		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2164 NEBULA WAY		
	401		
	W MELBOURNE, FL 32907		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address			
(Florida st	reet address)		
New Registered Office Address:	, Florida		
	(City) (Zip Code)		
New Registered Agent's Signature, if changing Registered Agen			
I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position (**) NOV Registered Accept if changing	7901J	
Signature of New I	Registered Agent, if changing		
Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11)	The state of the s	j	

'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 Doe	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change	<u></u>	_	
Add			
Remove 3) Change	<u>-</u>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			A: 22 (C. 5)
Remove			TALL ASSEE, FL
			SSEE FI

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA)	f amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)		
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	doption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	block does not meet the applicable statutory filing requirement epartment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amount ficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
(By a d	irector, president or other officer – if directors or officers have red, by an incorporator – if in the hands of a receiver, trustee, or otted fiduciary by that fiduciary) RUSSELL M BAILEY (Typed or printed name of person signing) PRESIDENT	
	(Title of person signing)	

