

LOT 000051525

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

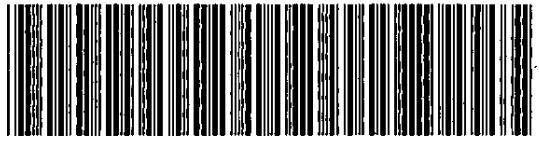
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400120362384

03/17/08--01012--020 \*\*30.00

FILED  
2008 MAR 17 PM 12:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. CLINE  
MAR 18 2008  
EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Women Ride Too! LLC  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

R. Terry Tjelmeland  
(Name of Person)

Women Ride Too!  
(Firm/Company)

1939 Park Meadows Dr #1  
(Address)

Ft Myers, FL 33907  
(City/State and Zip Code)

For further information concerning this matter, please call:

DEBRA TAYLOR at (239) 694-7433  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the 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

SECRETARY OF STATE  
 TALLAHASSEE, FL 32301  
 2008 MAR 17 PM 12:23  
 FILED

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Women Ride Too! 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 Liability Company were filed on May 14, 2007 and assigned  
Florida document number L07000051525.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

FILED  
2008 MAR 17 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

R. Terry Tjelmeland

New Registered Office Address:

1507 LILY POND CT

(Enter Florida street address)

Ft Myers

(City)

Florida

33901

(Zip Code)

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 608, 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.

R. Terry Tjelmeland

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	R. Terry Tijelmeland	1507 Lily Pond Ct Ft Myers, FL 33901	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove



D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

2008 MAR 17 PM 12: 23  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

FILED

Dated March 11, 2008.

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member  
  
 \_\_\_\_\_  
 Typed or printed name of signee