N0800007945

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Cartified Capies Cartificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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3/27am

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Bike for L | ife Inc. | | | |
|--|---|--|--|--|
| DOCUMENT NUMBER: NO800007 | 945 | | | |
| The enclosed Articles of Amendment and fee are subr | nitted for filing. | | | |
| Please return all correspondence concerning this matter | er to the following: | | | |
| Guerby Mertil | | | | |
| | (Name of Contact Person | 1) | | |
| Premier AthletegAcadem | y, Inc. | | | |
| 485 Brickell Ave Suite 7 | | | | |
| Miami-Beach, FL 33139 | (Address) | | | |
| | (City/ State and Zip Code | 2) | | |
| guerbymertil@gm | | | | |
| E-mail address: (to be used For further information concerning this matter, please | • | iotification) | | |
| Guerby Mertil | | 742-1703 | | |
| (Name of Contact Person) | at (305) 742-1703 (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount made pa | yable to the Florida Depa | 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 Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | | | |

Articles of Amendment to Articles of Incorporation of

| (Name of Corporation as currently filed with the Flo | awide Dont of State) | - |
|--|---|-------------|
| N0800007945 | orida Dept. of State) | |
| (Document Number of Corpor | oration (if known) | • |
| Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation: | tes, this Florida Not For Profit Corporation adopts the | following |
| A. If amending name, enter the new name of the corporat | tion: | |
| Premier Athlete Academy, Inc. | | _The new |
| name must be distinguishable and contain the word "corpord" "Company" or "Co." may not be used in the name. | ation" or "incorporated" or the abbreviation "Corp." (| |
| B. Enter new principal office address, if applicable: | N/A | |
| (Principal office address MUST BE A STREET ADDRESS | (i) | _ |
| | , | |
| | *** | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | H 22 |
| | | .D |
| | | - W |
| | | - |
| D. If amending the registered agent and/or registered off new registered agent and/or the new registered office. | fice address in Florida, enter the name of the address: | |
| Name of New Registered Agent: N/A | | |
| New Registered Office Address: | (Florida street address) | |
| | , Florida | |
| (City, | | |
| New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for | | |
| Signature of New Read | istered Agent, if changing | |

Page 1 of 4

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 X Remove X Add | <u>PT</u> <u>V</u> <u>SV</u> | John Doe Mike Jones Sally Smith | | | | |
|----------------------------------|------------------------------------|---------------------------------------|-----------|-------------|---------------|---------|
| Type of Action (Check One) | <u>Title</u> | <u>Nar</u> | <u>ne</u> | | | Address |
| 1) Change | | <u>N</u> | /A | | . | |
| Add | | | | | | |
| Remove | | | | | | |
| 2) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 3) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | • | |
| 5) Change | | | | | | |
| Add | | | | | | 7 |
| Remove | | | | | | |
| Kemove | | | | | | |
| 6) Change | | | | | · | |
| Add | | | | | | 11.77 |
| Remove | | | | | | |

| (attach ac | ling or adding dditional sheets | , if necessary, |). (Be s | pecific) | | | | |
|---------------------------------------|------------------------------------|---------------------------------------|-------------|--------------|---------------------------------------|---------------|--|--|
| N/A | | | | | | | | |
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| he date of each amendment(s) adoption: February 25, 2015 |
|--|
| ffective date if applicable: |
| (no more than 90 days after amendment file date) |
| |
| doption of Amendment(s) (CHECK ONE) |
| The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval. |
| There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors. |
| Dated February 25, 2013 Signature |
| (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
| Guerby Mertil |
| (Typed or printed name of person signing) |
| President |
| (Title of person signing) |