

7/27/2021

Division of Corporations

Florida Department of State
Division of Corporations
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**FLORIDA PROFIT/NON PROFIT CORPORATION
DEFIANT CYCLE WORKS INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

JUL 28 2021

T. SCOTT

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ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: DEFIANT CYCLE WORKS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2312 NW 162 Ter
Pembroke Pines, FL 33028

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Bicycle Coaching for fitness and group riding
skills

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Bethany R. Scott - President

Address: 2312 NW 162 Ter Address:

Pembroke Pines, FL
33028

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENTThe name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Bethania R. Scott
Address: 2312 NW 162 Ter
Pembroke Pines, FL 33028

ARTICLE VII INCORPORATORThe name and address of the Incorporator is:

Name: Bethania R. Scott
Address: 2312 NW 162 Ter
Pembroke Pines, FL 33028

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 96 days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

B Scott 7/26/2021
Required Signature/Registered Agent Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

B Scott 7/26/2021
Required Signature/Incorporator Date