The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.												
SIGNATURE:	BEVERLEE AHLIN											
	Electronic Signature of Registered Agent	Date										
Officer/Director Detail :												
Title	DPVP	Title	ST									
Name	SOMMER, MARGARET E	Name	SOMMER, MARGARET E									
Address	4703 SHORECREST DRIVE	Address	4703 SHORECREST DRIVE									
City-State-Zip:	ORLANDO FL 32817	City-State-Zip:	ORLANDO FL 32817									

**Current Mailing Address:** 

DOCUMENT# P0800009103

Entity Name: BIKE-SYNC, INC.

**Current Principal Place of Business:** 

4703 SHORECREST DRIVE ORLANDO, FL 32817

FEI Number: 26-1962721

## Name and Address of Current Registered Agent:

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

AHLIN, BEVERLEE 1620 MOHAWK TRAIL MAITLAND, FL 32751 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. DPVP 01/17/2016

ATONE.	Л		`	

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

**Secretary of State** CC6882568636

SIGNATURE: MARGARET E SOMMER

3100 BISHOP PARK DRIVE

ORLANDO, FL 32792

APT. 134