# F2000005259

(Re	equestor's Name)				
(Address)					
(Address)					
(Cit	ty/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



300355239733

11/19/20--0105 --014 (455)15

TICE SHOW TO THE SERVICE OF THE SERV

K. SALY NUV 2 3 2020

### COVER LETTER

TO:	Registration Section Division of Corporations					
erin i	ECT: Combat Hero Bike Build, Inc					
SUBJ	Name of Corporation – must include suffix					
Dear S	ir or Madam:					
Affairs	closed "Application by Foreign Not for Protit Corporation for Authorization to Conduct its in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to the above referenced not for profit corporation to conduct its affairs in Florida.					
Please	return all correspondence concerning this matter to the following:					
	Robert Sharp					
	Name of Person					
	Combat Hero Bike Build. Inc					
	Firm/Company					
	1763 Millwood Way					
	Address					
	The Villages, FL 32162					
	City/State and Zip Code					
	terry@combatherobikebuild.org					
	E-mail address: (to be used for future annual report notification)					
For fu	ther information concerning this matter, please call:					
Rober	Sharp 314 703-5687 at ( )					
	Name of Person Area Code Daytime Telephone Number					
	Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303					
Please	ed is a check for the following amount: nake check payable to: FLORIDA DEPARTMENT OF STATE .00 Filing Fee \$\Bigsim \$\$\$578.75 Filing Fee & \$\Bigsim \$\$\$\$\$Certificate of Status \$Certified Copy \$\$\$\$\$Certified Copy					

## APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503. FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

	made in Florida, enter anemate corporate	e name adopted for the purpose of transacting bus	iness in Florida)
Colorado	ntry under the law of which it is incorpora	3, 82-3695669 (FEI number, if applicable)	
. 12/14/2017	2	5. (Date of duration, if other than	nerneturi)
	ate of incorporation)	(Pate of dutation, if other than	perpetuary
NA NA	The state of the s	on. See sections 617.1501 & 617.1502, F.S. to deter-	mma nagalty liability \
		m. see sections 017.1391 & 017.1392, 135, 10 deter	mme penaig navang.
. 1520 Bluff Str	eet, Delta, CO 81416		
	(Princip	oal office <u>street</u> address)	
PO Box 1924,	Cañon City, CO 81215		
	(Current m	nailing address, if different)	
Nonprofit orga	inization serving severely wounded vetera	ountry to be carried out in the state of Florida)	2000
(Purpose(s) of	corporation authorized in home state or co	ountry to be carried out in the state of Florida)	
Name and str	<u>eet address</u> of Florida registered agent	t: (P.O. Box NOT acceptable)	DONOV 19 PH
		<u> </u>	(a) (b)
, , , , , , , , , , , , , , , , , , , ,			r 1
·	Robert Sharp		
Name:	1763 Millwood Way		57 CT
Name:	1763 Millwood Way	, Florida 32162 (Zip Code)	77 (T)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTOR			Ray McDowell				
□Chairman	John Barker Name:	□ Chairman	Name:				
□Vice Chairman	Address: 224 Buckhorn Pass	□Vice Chairman	Address:				
□Director	Grants Pass, OR 97527	□Director	Odessa, TX 79761				
<b>■</b> President		□President					
□Vice President		■Vice President					
☐ Secretary	☐Treasurer	□Secretary	□Treasurer				
□Other:	Other:	Other:	□Other:				
□Chairman	Robert Sharp Name:	□Chairman	Name:				
□Vice Chairman	Address: 1763 Millwood Way	□Vice Chairman	Address:				
Director	The Villages, Fl. 32162	□Director	The state of the s				
□President		□President	3 2 5				
□Vice President		□Vice President					
□Secretary	<b>■</b> Treasurer	☐ Secretary	☐Treasurer				
□Other:	Other:	□Other:	Other:				
☐Chairman	Name:	□Chairman	Name:				
□Vice Chairman	Address:	□Vice Chairman	Address:				
□Director		□Director					
□President		□President					
□Vice President		□Vice President					
□Secretary	□Treasurer	☐ Secretary	□Treasurer				
□ Other:	☐ Other:	□Other:	□Other:				
NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only.  Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  (Signature & Chairman, Vice Chairman, or any officer listed in number 12 of the application)  Robert Sharp. Treasurer  (Typed or printed name and capacity of person signing application)							

# OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

### CERTIFICATE OF FACT OF GOOD STANDING

I. Jena Griswold, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Combat Hero Bike Build, Inc.

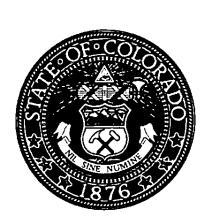
#### is a

#### Nonprofit Corporation

formed or registered on 12/14/2017 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20171926287.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 11/12/2020 that have been posted, and by documents delivered to this office electronically through 11/14/2020 @ 11:26:05.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 11/14/2020 @ 11:26:05 in accordance with applicable law. This certificate is assigned Confirmation Number 12726847



Secretary of State of the State of Colorado

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http. www.sos.state.co.us.htz CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click/"Businesses, trademarks, trade names" and select "Frequently Asked Questions."