

L18000 200076

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

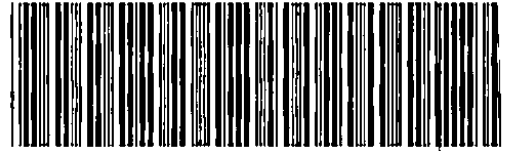
(Business Entity Name)

(Document Number)

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SEP 26 PM 1:26
TALLAHASSEE, FL

SEP 26 PM 1:26

SEP 11 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CR DESIGN & DEVELOPMENT, 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:

ROBERT PROVOST

Name of Person

CR DESIGN & DEVELOPMENT, LLC

Firm/Company

460 HILLSBORO TECHNOLOGY DRIVE

Address

DEERFIELD BEACH, FL 33441

City/State and Zip Code

ROB@LIFE.BIKE

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROBERT PROVOST 954 980-7469
at ()
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

TO
**ARTICLES OF ORGANIZATION
OF**

CR DESIGN & DEVELOPMENT, 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 08/21/2018 and assigned
Florida document number L18000200076.

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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

460 HILLSBORO TECHNOLOGY DR

(Principal office address MUST BE A STREET ADDRESS)

DEERFIELD BEACH, FL 33441

Enter new mailing address, if applicable:

460 HILLSBORO TECHNOLOGY DR

(Mailing address MAY BE A POST OFFICE BOX)

DEERFIELD BEACH, FL 33441

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:

ROBERT PROVOST

New Registered Office Address:

460 HILLSBORO TECHNOLOGY DR

Enter Florida street address

DEERFIELD BEACH, Florida 33441

City

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 605, 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.

If Changing Registered Agent, Signature of New Registered Agent

2019 SEP 26 PM 1:26

SECRET
TALLAHASSEE, FL

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	LIFE ELECTRIC VEHICLES, LLC	1601 GREEN ROAD C DEERFIELD BEACH, FL 33064	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	LIFE ELECTRIC VEHICLES, INC	460 HILLSBORO TECHNOLOGY DR DEERFIELD BEACH, FL 33441	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

THE OTHER MEMBER REMAINS THE SAME.

AEROBIC CRUISER HYBRID CYCLES, LLC

850 RIDGE LAKE BLVD SUITE 1

MEMPHIS, TN 38120

09/23/2019

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated SEPTEMBER 23RD 2019



Signature of a member or authorized representative of a member

ROBERT PROVOST

Typed or printed name of signee