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COVER LETTER

TO:

TO: Registration of Division of the Division o	on Section f Corporations		
	CLE VAN AND BYCICLE TEAM	1 LLC	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub	omitted for filing.	
Please return all cor	respondence concerning this matter	to the following:	
	VENTRESE FAUST		
		Name of Person	
	BYCICLE VAN AND BY	YCICLE TEAM LLC.	
		Firm/Company	
	6310 PINESTEAD DR. A	PT 411	
		Address	
	LAKE WORTH, FL 3346	63	
	FMCWCH FW I NIGHTON COCKNA	City/State and Zip Code	
	BICYCLEVAN2000@GM E-mail address: ((ATL.COM) (to be used for future annual report noti-	fication)
For further informat	ion concerning this matter, please c	•	·
VENTRESE FAUS	T	561 3138656	
N:	ame of Person	at () Area Code Daytim	e Telephone Number
Inclosed is a check	for the following amount:		
☐ \$25.00 Filing Fo	ee S30.00 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)
Division P.O. Box	on Section of Corporations	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BYCICLE	VAN AND	BYCICLE	TEAM 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 03/24/2021 and assigned Florida document number 200361942962 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: BICYCLE VAN AND BICYCLE TEAM, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 6310 PINE STEAD DR APT 411 Enter new principal offices address, if applicable: LAKE WORTH FL 33463 (Principal office address MUST BE A STREET ADDRESS) 6310 PINE STEAD DR APT 411 Enter new mailing address, if applicable: LAKE WORTH FL 33463 (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	VENTRESE FAUST	6310 PINE STEAD DR	≣ Add
		LAKE WORTH FL 33463	
			□ Change
AMBR	TIMOTHY FAUST	6310 PINE STEAD DR	≣ Add
		LAKE WORTH FL 33463	[]Remove
		□Change	
		⊟Remove	
			□Change
		□Add	
		·	□Remove
		□Change	
		∐Add	
		□Remove	
		☐ Change	
		□Add	
		□Remove	
			□Change

E. Effect	ive date, if other than the date of filing: (optional)
(If an ct <u>Note:</u>	ive date, if other than the date of filing:
f the reco record is f	rd 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 led.
Dated	05/10/a024
Zuica	O5/10/2024 Mentrose Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member
	Ventrese faust

Typed or printed name of signee