

L24000389757

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**DATE: 10/02/2024**

**NAME: EPIC CYCLES USA LLC**

**TYPE OF FILING: AMENDMENT**

**COST: 25.00**

**RETURN: PLAIN COPY PLEASE**

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**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EPIC CYCLES USA 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:

Paul Doucette

\_\_\_\_\_  
Name of Person

A.R.G. International LLC

\_\_\_\_\_  
Firm/Company

Marina de Salinas, PR 701 Calle Chapin G-8

\_\_\_\_\_  
Address

Salinas, PR 00751

\_\_\_\_\_  
City/State and Zip Code

pdoucette@argadvisors.com

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

For further information concerning this matter, please call:

Paul Doucette

770 876-3553  
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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

**2024 OCT -2 AM 11:40**

EPIC CYCLES USA LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on September 6, 2024 and assigned  
Florida document number L24000389757.

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:**

2882 N Federal Hwy

**(Principal office address MUST BE A STREET ADDRESS)**

Boca Raton, FL 33431

**Enter new mailing address, if applicable:**

2882 N Federal Hwy

**(Mailing address MAY BE A POST OFFICE BOX)**

Boca Raton, FL 33431

**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:

2882 N Federal Hwy

*Enter Florida street address*

Boca Raton

*City*

Florida 33431

*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**

•MGR = Manager  
•AMBR = Authorized Member

Title	Name	Address	Type of Action
AMBR	Fariborz Amirian	9305 Old Pine Rd	<input type="checkbox"/> Add
		Boca Raton, FL 33428	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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		<input type="checkbox"/> Change	

Adding FEIN: 99-4810197

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CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

**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.

Dated October 2 2024

Handwritten signature: *Handwritten signature*

Paul Doucette

Typed or printed name of signee

**Filing Fee: \$25.00**