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LEAH'S CORPORATE FILING SERVICE

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MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. MIAMI RIDERS MOTORCYCLE CLUB CORP.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

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☒ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input checked="" type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED
01 DEC 17 PM 12:01
RECEIVED
01 DEC 17 AM 10:29
TALLAHASSEE FLORIDA
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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-12/17/01--01015--022
*****78.75 *****78.75

Examiner's Initials

FILED
01 DEC 17 PM 12:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

**ARTICLES OF INCORPORATION
FOR**

The undersigned, acting as Incorporator(s) of a corporation pursuant to chapter 617, Florida Statutes, adopt(s) the following Articles of Incorporation:

ARTICLE I NAME:

The name of the corporation shall be:

MIAMI RIDERS MOTORCYCLE CLUB CORP.

ARTICLE II PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

The principal and mailing address of this corporation is:

2471 NW 72nd AVE.
Miami, FL 33122

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is (are):

TO FORM A GROUP OF RESPONSIBLE MOTORCYCLE RIDERS WHO
ALSO ENJOY SERVING OUR COMMUNITY BY GIVING BACK TO
DIFFERENT CHARITABLE ORGANIZATIONS THOSE MONIES OR ITEMS
COLLECTED THROUGH DIFFERENT ORGANIZED CHARITABLE EVENTS.

ARTICLE IV MANNER OF ELECTIONS OF DIRECTORS:

The manner in which the directors are elected or appointed is as follows:

BY THE BYLAWS

ARTICLE V LIMITATION OF CORPORATE POWERS

The corporate powers of this corporation are as provided the section 617.0302, Florida Statutes, unless limited as follows:

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

GLORIA M. POU
2471 NW 72 AVE.
MIAMI, FL 33122

ARTICLE VII DIRECTORS (must have the minimum of three directors): **NAME AND ADDRESS**

PRESIDENT/DIRECTOR - DIANA ECHEVERRY 2471 NW 72 AVE.
MIAMI, FL 33122

VICE-PRESIDENT/DIRECTOR - GLORIA M. POU 2471 NW 72 AVE.
MIAMI, FL 33122

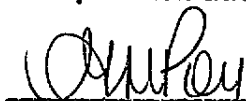
SEC./TREASURER/DIRECTOR - ESTHER ALAYETO 2471 NW 72 AVE.
MIAMI, FL 33122

ARTICLE VIII INCORPORATOR

The name and street address of the incorporator for these Article of Incorporator is:

GLORIA M. POU
2471 NW 72 AVE.
MIAMI, FL 33122

The undersigned incorporator has executed these Articles of Incorporation this 14 day of DECEMBER, 2001



signature

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STATUTES, THE
UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF
FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE
REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is:

MIAMI RIDERS MOTORCYCLE CLUB CORP.

(must include suffix)

2. The name and address of the registered agent and office is:

GLORIA M. POU

(NAME)

2471 NW 72 AVE.

(P.O. Box or Mail Drop Box NOT ACCEPTABLE)

MIAMI, FL 33122

(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(SIGNATURE)

12/14/01

(DATE)

01 DEC 17 PM 12: 01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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