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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

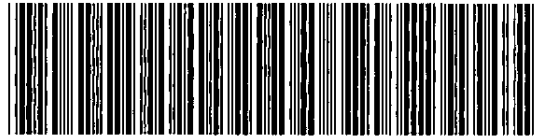
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2008 APR 28 AM 6:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend*  
*SL*

5-208

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** North Central Florida Bike Events, Inc.

**DOCUMENT NUMBER:** N08000003213

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carolyn Perreault

(Name of Contact Person)

North Central Florida Bike Events, Inc.

(Firm/ Company)

11416 NW State Road 45

(Address)

High Springs, FL 32643

(City/ State and Zip Code)

For further information concerning this matter, please call:

Carolyn Perreault

(Name of Contact Person)

at ( 352 ) 665-0084

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

North Central Florida Bike Events, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

FILED  
2008 APR 28 AM 6:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

N08000003213

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Article II 11416 NW State Road 45, High Springs, FL 32643 (Address Change)

Article VI 11512 NW State Road 45, High Springs, FL 32643 (Pres/Director address change)

Article VI Carolyn (first name Secretary/Director spelling)

Article VII The Registered Agent of the Corporation is Carolyn Perreault, 11416 NW State Road 45, High Springs, FL 32643

Article VIII (address change) 11512 NW State Road 45, High Springs, FL 32643

(ADD) Article XI see attached sheet

(ADD) Article XII see attached sheet

(Attach additional pages if necessary)  
(continued)

Articles of Amendment  
To  
Articles of Corporation  
Of  
North Central Florida Bike Events, Inc.

Amendments Adopted

Add the following Articles.

**Article XI**

No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth in Article III hereof. Notwithstanding any other provision of these articles, the corporation shall not carry on any other activities not permitted to be carried on by a corporation exempt from federal income tax and under section 501(c) (3) of the Internal Revenue Code.

**Article XII**

Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to the state or local government, for a public purpose. Any such assets not so disposed of shall be disposed of by a court of Competent Jurisdiction of the county in which the principal office of the corporation is then located, exclusively for such purposes or to such organization or organizations, as said court shall determine, which are organized and operated exclusively for such purposes.

The date of adoption of the amendment(s) was: 4/24/08

Effective date if applicable: 4/24/08  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☒ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☐ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature

Carolyn Perreault  
(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Carolyn Perreault  
(Typed or printed name of person signing)

Secretary / director.  
(Title of person signing)

**FILING FEE: \$35**

### Certification

**Name of Corporation:** North Central Florida Bike Events, Inc.

**Doc #:** N08000003213

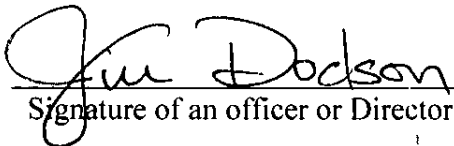
**Name and Address of current registered agent and registered office on file with the Florida Department of State:**

Sally Ann Wilson, 217 SE Cataldo Glen, High Springs, FL 32643

**Name and Address of the new registered agent and registered office:**

Carolyn Perreault, 11416 NW State Road 45, High Springs, FL 32643

Such change was authorized by resolution duly adopted by its board of directors.

  
Signature of an officer or Director

JIM DODSON, TREASURER  
Print Name and Title

*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 obligation of my position as registered agent.*

  
Signature of registered agent

4/24/08  
Date