08000003213

(Requestor's Name)
, (Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Flyng Officer: Why was in the threat.

Office Use Only



000132436130

07/15/08--01024--008 **35.00

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 Ferreault		
	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	at (352) 665-0084	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S\$2.50 Filing Fee Certified Copy (Additional copy is enclosed) \$\$43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy 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	

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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 18, 2008

CAROLYN PERREAULT 11416 N.W. STATE ROAD 45 HIGH SPRINGS, FL 32643

SUBJECT: NORTH CENTRAL FLORIDA BIKE EVENTS, INC.

Ref. Number: N08000003213

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245 6906.

Darlene Ennell

ுRe**g**lat**ery** Specialist II

Letter Number: 208A00042113

(Attach additional pages if necessary)

The date of adoption of the amendment(s) was:		
Effective date if applicable:	(u_ u_ o d o d o d o d o d o d o d o d o d o	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
	is (were) adopted by the members and the number of votes cas as sufficient for approval.	
	s or members entitled to vote on the amendment. The ere) adopted by the board of directors.	
have not been select	vice chairman of the board, president or other officer- if directors eted, by an incorporator- if in the hands of a receiver, trustee, or ed fiduciary, by that fiduciary.)	
Bill Black	%	
(Тур	ed or printed name of person signing)	
President/Dire	ctor	
	(Title of person signing)	

FILING FEE: \$35