N09000008385

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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SECRETARY OF SHATE

N. C. C.COULLIETTE

SEP 1 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Safe Bicycling C | Coalition, Inc. | |
|--|--|---|
| DOCUMENT NUMBER: <u>N0900008385</u> | | |
| The enclosed Articles of Amendment and fee are subm | itted for filing. | |
| Please return all correspondence concerning this matter | to the following: | |
| | ynne, Esq. | |
| (Name of Co | ontact Person) | |
| Akerma | n Senterfitt | |
| (Firm/ C | Company) | |
| 350 E. Las Olas | Blvd., Suite 1600 | |
| | ldress) | |
| | L I. El 00004 | |
| | dale, FL 33301 and Zip Code) | |
| (City) State | and Zip Codo) | |
| jeffrey.lynne(| @akerman.com | |
| E-mail address: (to be used | for future annual report notification | on) |
| For further information concerning this matter, please of | call: | |
| Jeffrey Lynne, Esq. | at (954) 759-8969 | |
| (Name of Contact Person) | at (954) 759-8969 (Area Code & Daytime | Telephone Number) |
| Enclosed is a check for the following amount made pay | yable to the Florida Department o | f State: |
| | □ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □ \$52.50 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 C Tallahassee, FL 32301 | |

Articles of Amendment to Articles of Incorporation of

| Safe Bicycling C | coalition, Inc. | |
|---|-------------------------------------|-----------------------|
| (Name of Corporation as currently fil | ed with the Florida Dept. of State) | |
| N0900000 | 08385 | |
| (Document Number of | Corporation (if known) | |
| Pursuant to the provisions of section 617.1006, Florida the following amendment(s) to its Articles of Incorpora | . | it Corporation adopts |
| A. If amending name, enter the new name of the co | rporation: | |
| South Florida Bike | e Coalition, Inc. | |
| The new name must be distinguishable and contain tabbreviation "Corp." or "Inc." "Company" or "Co." | | orated" or the |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD | | OO SEP |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) | <u>X</u>) | AHIO: 49 |
| D. If amending the registered agent and/or register new registered agent and/or the new registered of | | the name of the |
| Name of New Registered Agent: | | |
| New Registered Office Address: | (Florida street address) | |
| · | , (City) | Florida (Zip Code) |
| New Registered Agent's Signature, if changing Registered agent, position. | istered Agent: | he obligations of the |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Title \ Address Type of Action <u>Name</u> ☐ Add ☐ Remove _ 🗆 Add ☐ Remove ☐ Add Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary) (Be specific)

| The date of each amendmen | t(s) adoption: 9/1/09 |
|---|---|
| Effective date <u>if applicable</u> : | 9/1/09 (date of adoption is required) |
| | (no more than 90 days after amendment file date) |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/we was/were sufficient for app | ere adopted by the members and the number of votes cast for the amendment(s) proval. |
| There are no members or adopted by the board of di | members entitled to vote on the amendment(s). The amendment(s) was/were rectors. |
| Dated_8/31 | /09 |
| hav | the chairman of vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator – if in the hands of a receiver, trustee, other court appointed fiduciary by that fiduciary) |
| | Jeffrey Lynne, Esq. |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |

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