N12000001325

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SECRETARY OF STATE

June 04 2020

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

LAST RID NAME OF CORPORATION:	E INC		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are			
Please return all correspondence concerning this	matter to the following:		
ANTHONY A. RUFRANO			
 	(Name of Contact F	'erson)	
LAST RIDE INC			
	(Firm/ Compan	y)	
35550 QUAIL RUN			
	(Address)		
LEESBURG, FL 34788			
	(City/ State and Zip	Code)	
S.RUFRANO@AOL.COM			
E-mail address: (to be	used for future annual re	port notification	n)
For further information concerning this matter, pl	lease call:		
ANTHONY A. RUFRANO	al	407	448.6715
(Name of Contact Pe	rson)	(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made	de payable to the Florida	Department of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of State	-	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ai Di	reet Address mendment Sectivision of Corpo ne Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LAST RIDE INC

(Name of Corporation as currently filed with the Florida	Dept. of State)		
N12000001325			
(Document Num	ber of Corporation (if known)	
Pursuant to the provisions of section 617,1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this <i>Florida No</i>	t For Profit Corporation &	dopts the following
A. If amending name, enter the new name of the corpora	ition:		
			The new
name must be distinguishable and contain the word "corpor "Company" or "Co." may not be used in the name	ation" or "incorpor	ated" or the abbreviation	"Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2020 KAY
			5 5
			Par Par l
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office		ida, enter the name of the	2: 01
Name of New Registered Agent:			<u> </u>
New Registered Office Address:		(Florida street address)	
		, Florida (Zip C	
	(City)	(Zip C	'ode)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		rept the obligations of the p	osition.
	Signature of New Re	gistered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, nam
and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add		_	
Remove			
2) Change Add			
Remove			
4) Change Add			
Remove 51 Change Add			
Remove 6) Change Add			
(attach additional shee	ts, if nece	onal Articles, enter change(s) here: Pssary) (Be specific) OF SERVICES TO INCLUDE ASSISTANCE TO VETERANS	AND VETERAN ORGINAZATIONS WITH

		
		
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·		
The date of each amendment(s) adopt date this document was signed.	ion:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	loes not meet the applicable statutory filing requirements, this date will not	be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt- was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	

Dated Signature (By	the chairman or vice chairman of the board, president or other officer-if directors
	re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	ANTHONY A. RUFRANO
-	(Typed or printed name of person signing)
	PRESIDENT
-	(Title of person signing)