N12000009642

(F	Requestor's Name)
(<i>F</i>	Address)
(<i>F</i>	Address)
(0	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(0	Oocument Number)
Certified Copies	Certificates of Status
Special Instructions to	p Filing Officer:
	Office Use Only



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13 FEB 18 PH 2: 34, SECRETARY OF STATE TALLAHASSEE, FLORIDA

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TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Let Us R	ide	
DOCUMENT NUMBER: N1200009	9642	
The enclosed Articles of Amendment and fee are sub	mitted for filing.	
Please return all correspondence concerning this matt	ter to the following:	
Steve Schryver		
	(Name of Contact Person	n)
Let Us Ride, Inc		
•	(Firm/ Company)	
11507 E MLK Jr. Blvd #	297	
	(Address)	
Mango, FL 33550		
	(City/ State and Zip Code	e)
letusrideinc@yah	oo.com	
E-mail address: (to be used	d for future annual report	notification)
For further information concerning this matter, please	call:	
Steve Schryver	_{at} 813	415-8896 ode & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	ode & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	ayable to the Florida Depa	rtment of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	\$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	Amend Divisio	Address ment Section n of Corporations Building

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

January 29, 2013

STEVE SCHRYVER LET US RIDE, INC. 11507 E MLK JR. BLVD #297 MANGO, FL 33550

SUBJECT: LET US RIDE, INC. Ref. Number: N12000009642

We have received your document for LET US RIDE, INC. and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Please provide officer signature.

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) 245-6050.

Sylvia Gilbert Regulatory Specialist II

Letter Number: 313A00002221



Articles of Amendment Articles of Incorporation

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• •	Articles of Amen	ndment / / /	.3
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	of	- A34	
Let Us Ride, Inc.		ALCOSE, 18 A). H
(Name of Corporation as currently	filed with the Florida Dept.	of State)	رج ج
N12000009642		XX. XX	PAR
	Number of Corporation (if kn	oration Jackson Allown	RIGA
cursuant to the provisions of section 617.10 mendment(s) to its Articles of Incorporation		rida Not For Profit Corporation adopts the following	
. If amending name, enter the new nam	ne of the corporation:		
		The new	
		ncorporated" or the abbreviation "Corp." or "Inc."	
Company" or "Co." may not be used in t	<u>ne name</u> .		
Enter new principal office address, if			
Principal office address <u>MUST BE A STI</u>	REET ADDRESS)		
	Addition that they are a fine of the state o		
			
Enter new mailing address, if applica			
(Mailing address MAY BE A POST O	FFICE BOX)		
	4	 	
. If amending the registered agent and		in Florida, enter the name of the	
new registered agent and/or the new	registered office address:		
Name of New Registered Agent:		- The black and an art of the State	
In Brains A Office A Library	(Florida stree	et address)	
lew Registered Office Address:			
	·····	, Florida	
-	(City)	(Zip Code)	
-			
lew Registered Agent's Signature, if cha	inging Registered Agent:		

Page 1 of 4

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)

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 <math>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	V Mil	n <u>Doe</u> ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l) Change	VP	Robert Goutremout	13381 Case Rd
X Add			Chaumont, NY 13622
Remove			
2) Change	Sec	Jordan Schryver	26391 Spike Rd
Add			Brooksville, FL 34602
X Remove			
3)Change	VP	Andre Mettler	9520 E. Mlk Dr Blvd
Add			Tampa, FL 33610
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			**************************************
Remove			

attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
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The	The date of each amendment(s) adoption: 1/15/13				
Effe	ective date if applicable:				
	(no more than 90 days after amendment file date)				
Ada	option of Amendment(s) (<u>CHECK ONE</u>)				
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.				
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
	Dated 1/15/13				
	Signature				
	(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)				
	Steve Schyver				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				