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SECRETAIN OF STATE
TALLAHASSEE FLORIDA

JAN 26 2016

H. Vience

#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N:	YCLE EXCHANG	E, INC.	
DOCUMENT NUMBER: _	N15000001299			
The enclosed Articles of Ame	endment and fee are subm	itted for filing.		
Please return all corresponde	nce concerning this matter	to the following:		
MARK J LABATE, ESQ				
	(	Name of Contact F	Person)	
MARK J LABATE, PA				
		(Firm/ Compar	ny)	
2748 E COMMERCIAL BL	VD			
		(Address)		
FT LAUDERDALE, FL 333	08			
	(1	City/ State and Zip	Code)	
markjlabate@gmail.com				
Б-	mail address: (to be used t	for future annual re	port notification	1)
For further information conce	erning this matter, please c	all:		
MARK J LABATE		а	954 t	545-36-5
(	Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pay	able to the Florida	Department of	State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
Mailing Ac			reet Address	
Amendmen Division of	t Section Corporations		mendment Sect ivision of Corpo	
P.O. Box 6			lifton Building	n austia
Tallahassee			661 Executive C	Center Circle

Tallahassee, FL 32301

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## 16 JAN 25 PM 8: 17

#### Articles of Amendment to Articles of Incorporation

SECRETARY OF STATE TALLAHASSEE FLORIDA

RECYCLABLE BICYCLE EXCHANGE, INC.

(Name of Corporation as cu	N15000001299	
(Document N	umber of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006. Florida St amendment(s) to its Articles of Incorporation:	·	
A. If amending name, enter the new name of the corp	oration:	
n/a		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated	
B. Enter new principal office address, if applicable:	n/a	
(Principal office address <u>MUST BE A STREET ADDRI</u>	ESS )	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )	n/a	
	<del></del>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		enter the name of the
n/a	ict additos.	
Name of New Registered Agent:		
	(F)	orıda street address)
New Registered Office Address:	,,,	orial street dadress)
n/a		Florida
<del></del> -	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a	ered Agent: m familiar with and accept	the obligations of the position.
	. /	
	Signature of New Pools	tered Agent, if changing
	Signature of New Regist	erea ngem, y changing

### 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	<u>V</u> <u>Mik</u>	n Doe e Jones y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) X Change	PTD	JEFFREY S TORKELSON	1750 NE 11TH STREET
Add			FT LAUDERDALE, FL 33304
Remove			<del></del>
2) Change	VPD	LISA TORKELSON	1750 NE 11TH STREET
X Add			FT LAUDERDALE, FL 33304
Remove			
3 ) Change	SD	CHRISTOPHER LLOYD	1750 NE 11TH STREET
X Add			FT LAUDERDALE, FL 33304
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

2. If amending or adding additional Article (attach additional sheets, if necessary).	icles, enter change(s) here:  (Be specific)
AMENDMENT TO ARTICLE III	
Promote the health and social interaction sl	kills of the children of South Florida by:
) donating to such children, based on neco	i, used bicycles donated by the public and refurbished by the corporation; and
2) educating such children in the maintenan	nce of their bicycles.
•	
	10 11 10 10 10 10 10 10 10 10 10 10 10 1

	this document was signed.	, if other than the
Effe	ective date if applicable:	
	(no more than 90 days after amendment file date)	
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ument's effective date on the Department of State's records.	listed as the
Ado	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.	
	Signature  (By the Grainman 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)  JEFFREY S TORKELSON  (Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	