

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # N9700000765

FILED May 04, 1999 8:00 am § Secretary of State

05-04-1999 90198 034 ****61.25

1. Corporation Name TALLAHASSEE PEDAL POWER, INC. II 484671 - 90198 ^{- 27} Principal Place of Business Mailing Address 3989 WOODVILLE HWY 3989 WOODVILLE HWY LOT 45 TALLAHASSEE FL 32311 TALLAHASSEE FL 32311 3. Date incorporated or Qualifed 2a. Mailing Address 2. Principal Place of Business 02/08/1997 21 26 FEI Number Applied For Suite, Apt. #, etc. Suite, Apt. #, etc. 59-3445140 Not Applicable 27 22 City & State \$8.75 Additional City & State 5. Certificate of Status Desired Fee Required 23 28 Country Country Zip \$5.00 May Be Zip 6. Election Campaign Financing Added to Fees 30 Trust Fund Contribution 25 29 24 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent DURANT. REBECCA Street Address (P.O. Box Number is Not Acceptable) 8708 WALTHAM COURT 83 TALLAHASSEE FL 32311 Zip Code 84 City 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 OFFICERS AND DIRECTORS DELETE ☐ Change ☐ Addition 1.1 TITLE TITLE 1.2 NAME BARNES, CEDRIC NAME 1.3 STREET ADDRESS 3989 WOODVILLE HWY STREET ADDRES TALLAHASSEE FL 32311 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change DELETE 2.1 TITLE TITLE 22 NAME **DURANT, REBECCA** NAME **8708 WALTHAM COURT** 2.3 STREET ADDRESS STREET ADDRESS TALLAHASSEE FL 32311 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Addition TITLE 3.1 TITLE 3.2 NAME ARMANFISH, KIRT NAME ARMANTROUT, KIRT 3.3 STREET ADDRESS STREET ADDRESS 3421 SPRINIL ROAD 5113 Red Fox Run, Tallahassee FL 32303 3.4. CITY-ST-ZIP CITY-ST-ZIP TALLAHASSEE FL 32310 DELETE ☐ Change ☐ Addition 4.1 TTTLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITI F 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 6.1 TTLE ☐ Change Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

(11/98)CR2E037