P01000023882 DOCUMENT # FILED 1. Entity Name CONUNDRUM CYCLING, INC. n2.101 30 AM 9:23 SECRETARY OF STATE Principal Place of Business Mailing Address TALLAHASSEE, FLORIDA 1471 N LAGOON POINT 1471 N LAGOON POINT **INVERNESS FL 34452** INVERNESS FL 34452 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3702006 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 24453 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent SANSOM, ROBIN L Street Address (P.O. Box Number is Not Acceptable) 1471 N LAGOON POINT **INVERNESS FL 34452** City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. President CR2E034 (4/02) TITLE □ Delete TITLE ☐ Change Robin L. Sanson 700006917857---08/06/02--01051--014 NAME NAME STREET ADDRESS STREET ADDRESS 1471. N. Lagoon Pt. CITY-ST-ZIP CITY-ST-ZIP ****150.00 ****150.00 TITLE Secretary/Treasurer ☐ Delete TITLE NAME Barbara G. Sansom NAME 1471. N. Lagoon Pt. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 report or supplemental 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

2002 UNIFORM BUSINESS REPORT (UBR)

attachmento #P01000023882

CONUNDRUM CYCLING, INC.

1471 N. Lagoon Point Inverness, FL 34453 Ph #: 352-637-3554

July 24, 2002

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

To Whom It May Concern:

This letter is to respectfully request that the penalties associated with the dissolution of our corporation be abated. We are a very small corporation and it has recently been made my responsibility to maintain the corporation's books and deal with the corporation's official business. Unfortunately, the annual report was not a routine item and was unintentionally overlooked. We have made the necessary arrangements to ensure the report will be filed timely in the future. We have always paid our fees in a timely manner in the past and have had no intention to dissolve.

We would like to reinstate our corporation, however payment of these penalties will produce a heavy financial burden.

If additional information is needed, please feel free to call. Thank you for considering our request.

Sincerely,

Barbara G. Sansom, Secretary/Treasurer

Barbara & Sanson