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(Re	equestor's Name)			
(Ac	idress)	· · · · · · · · · · · · · · · · · · · 		
(Ac	ldress)			
(Ci	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to AUTHORIZATION I CORRECT / LT DATE / 29/ DOC. EXAM	arphy.	GAVE VIV		

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TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	PROPOSED CORPORA	s, Inc.		_	
	(FROPOSED CORPORA	i e name – <u>most ince</u>	ODE SUFFIX)		
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:		
□ \$70.00 Filing Fee	\$78.75 \$871.50 Filing Fee & Certificate of Status + Certified copy	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL CO	PPY REQUIRED		
FROM:	David Murphy o	end Karen Len	łz		
	Name	(Printed or typed)			-
	1833 Abbeyridg	ddress			· North Barrier
	Merritt Islan Cily,	d, FL 32953 State & Zip			
	(321) 288 - 0775				
	Daytime To	elephone number			

NOTE: Please provide the original and one copy of the articles.

		FILED	
ARTICLES OF INCORPORATION		SECRETARY OF STATE	_
In compliance with Chapter 607 and/or Chapter 621	, F.S. (Profit)	TALLAHASSEE, FLORIDA	1
ARTICLE I NAME		05 AUG 29 PM 2: 19	
The name of the corporation shall be: St Gear	Cycles, Inc.	SILVE DATE	
ARTICLE II PRINCIPAL OFFICE			
	357 Imperial Blvd.	= ., •	
	· · · · · · · · · · · · · · · · · · ·		
	Building E #1 Cape Canaveral, FL	920	
ARTICLE III PURPOSE	-	4	
The purpose for which the corporation is organized	15: Notorcycle servi	ce property series years	
ARTICLE IV SHARES			
The number of shares of stock is: /	<u></u> •	· · · · · ·	-
ARTICLE V INITIAL OFFICERS AND/O	R DIRECTORS		
List name(s), address(es) and specific title(s):	A	Dinner	
David D. Murphy, owner 1833 Abbeyridge Dr.	Karen A. Lentz	, Owler	
Memit Island, FL 32953	1833 Abbeyridge Memitt Island	FL 32953	
, conversion in the conversion of the conversion		`	
ARTICLE VI REGISTERED AGENT			
The name and Florida street address (P.O. Box NO	T acceptable) of the registered	d agent is:	
David D. Murphy			
1833 Abbeyridge Dr. Merritt Island, FL 32953			
ARTICLE VII INCORPORATOR			
The <u>name and address</u> of the Incorporator is:	· · · · · · · · · · · · · · · · · · ·	*	•
David D. Murphy			
David D. Murphy 1833 Abbeyridge Dr.	**		
Memitt Island, FL 32953 ************************************	*******	*******	
Having been named as registered agent to accept service of pr	rocess for the above stated corporat	tion at the place designated in this	
certificate, I am familiar with and accept the appointment as re	gisterea agent and agree to act in th	us capacity	

Date

Signature/Incorporator

Article VII: EFFECTIVE DATE

September 1, 2005