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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Roberts JAN 20 2010

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Riders Unlimited Inc  
Name of Corporation

**DOCUMENT NUMBER:** P06000123708

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Robert Twombly, Esquire  
Name of Contact Person

Blaxberg, Grayson & Kukoff, P.A.  
Firm/Company

25 S.E. 2nd Avenue, Ste. 730  
Address

Miami, FL 33131  
City/State and Zip Code

twombly@blaxgray.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Twombly, Esquire at ( 305 ) 381-7979  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this  
• statement of change is submitted for a corporation organized under the laws of the State of Florida  
\_\_\_\_\_ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Riders Unlimited Inc

2. The principal office address: 422 NW North River Drive, Miami, FL 33128

3. The mailing address (if different): Same

4. Date of incorporation/qualification: 09/26/2006 Document number: P06000123708

5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State: (If resigned, enter resigned)

Gilbride, Heller & Brown, P.A., 2 South Biscayne Blvd.

Ste. 1570, Miami, FL 33131 - RESIGNED 10/20/2009

6. The name and street address of the new registered agent (if changed) and /or registered office  
(if changed):

Blaxberg, Grayson & Kukoff, P.A.

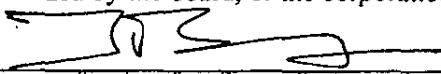
25 S.E. 2nd Avenue, Ste. 730

P.O. Box NOT acceptable

Miami, FL 33131

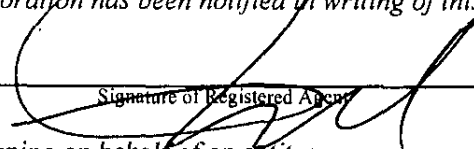
The street address of its registered office and the street address of the business office of its registered agent,  
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

  
\_\_\_\_\_  
Signature of an officer or director

Jean-Francois, President  
\_\_\_\_\_  
Printed or typed name and title

*I hereby accept the appointment as registered agent and agree to act in this capacity.  
I further agree to comply with the provisions of all statutes relative to the proper and complete performance  
of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this  
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the  
corporation has been notified in writing of this change.*

  
\_\_\_\_\_  
Signature of Registered Agent

1/13/2010  
\_\_\_\_\_  
Date

If signing on behalf of an entity:

Robert Twombly, Esquire  
\_\_\_\_\_  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*