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'AUG 3 1 2012

T. ROBERTS

COVER LETTER

TO: Amendment Section Division of Corporations

•	CC's Motor	cycle Training, I	nc
NAME OF CORPO	RATION: OGG WICKE	- Training, i	
DOCUMENT NUM	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this mat	tter to the following:	
	Mike Childers		
		Name of Contact Persor	1
	CC's Motorcycle	Training, Inc.	
		Firm/ Company	
	129 Clearwater R	load	
		Address	
	Satsuma, FL 321	89	
		City/ State and Zip Code	:
mil	koohildara@aamat	orovolotrajnina d	nom.
- 1111	kechilders@ccmot	ed for future annual report	
	E-mail address. (to be us	ed for future affilial report	nouncation)
For further information	on concerning this matter, pleas	e call·	
Tor further information	in concerning this matter, preas	o van,	
Mike Childer	'S	at (352	, 331-0131
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	urtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	iling Address		Address
	nendment Section		ment Section
Division of Corporations P.O. Box 6327			n of Corporations Building
	lahassee, FL 32314		xecutive Center Circle
		Tallahs	issee FL 32301

Articles of Amendment to Articles of Incorporation of

	Articles of An	ienament	
	to Articles of Inco	moration	grand a
	of	rporation	
CC's Motorcycle Training	g, Inc.		R AUG 30 AM 11:09
(Name of Corporation as	currently filed with the Flo	orida Dept. of State)	Sr. 20 30
			11:09
(Documer	nt Number of Corporation (if	known)	WASE STATE
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	Florida Profit Corporation :	adopts the following amendment(s
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "C	Co". A professional corpo	
B. Enter new principal office address,	if applicable:		
(Principal office address MUST BE A S	TREET ADDRESS)		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		P.O. Box 2276 Middleburg, FL	32050
D. If amending the registered agent an	d/or registered office addr	ess in Florida, enter the na	nme of the
new registered agent and/or the new			"
Name of New Registered Agent	Mike Childers		_
	129 Clearwater	Road	
	(Florida stre	•	-
New Registered Office Address:	Satsuma	Florid	_a 32189
New Registered Office radices.	(City)	, i toriu	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist Signature.		Police	ons of the position. —
	' /		

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	<u>P</u>	Mike Childers	129 Clearwater Road
Add			Satsuma, FL 32189
Remove			
2) Change	Р	David Childers	4139 Half Moon Circle
Add			Middleburg, FL 32068
X			
3) Change	V	Gianna Childers	4139 Half Moon Circle
X			Middleburg, FL 32068
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			- · · · · · · · · · · · · · · · · · · ·
6) Change			<u> </u>
Add			
Remove			

E. If amending or adding additional Art	icles, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
	- · · · · · · · · · · · · · · · · · · ·
· <u>·</u>	
F. If an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N/A	
IN/A	
	

The date of each amendment(s)	adoption: 08/21/2012
Effective date if applicable:	8/21/2012
Effective date in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
☐ The amendment(s) was/were a must be separately provided y	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voling group)
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated_08/2	1/2012
Signature	Wise Glober
(By selection)	a director, president or other efficer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Mike Childers
	(Typed or printed name of person signing)
	President
	(Title of person signing)