901 WW 64683

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT, KEN'S CYCLE CENTER, INC.	
SUBJECT: KEN'S CYCLE CENTER, INC. Name of Corporation	
DOCUMENT NUMBER: P07000064683	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing	ng.
Please return all correspondence concerning this matter to the following:	
Hobel Florido	
Name of Contact Person	
Florido Law Group, PA	
Firm/Company	
14345 Commerce Way	2
Address	0Z ^L 1
Miami Lakes, FL 33016	۳ <u>۲</u> ۳
City/State and Zip Code	2024 JUL 3'
williamsjay78@gmail.com	= 1.
E-mail address: (to be used for future annual report notification)	M 9.

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

For further information concerning this matter, please call:

Name of Contact Person

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

Amendment Section **Division of Corporations** The Centre of Tallahassee

at (305) 722-4002
Area Code & Daytime Telephone Number

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

Hobel Florido

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Kenneth M. Diedrick I,	Director, hereby resign as	
	(Title)	
Ken's Cycle Center, inc.		
(Nam	e of Corporation)	
P07000064683	, a corporation organized under the laws of the State of	
(Document Number, if known)		
Florida		
To the second se	(Signature of resigning officer/director)	

Make checks payable to Florida Department of State and mail to:

FILING FEE IS \$35.00

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314