## P09 000093230

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## **COVER LETTER**

**TO:** Amendment Section

Division of Corporations

NAME OF CORPORATION: MIDTOWN CYCLES OF SAINT-Cloud IN
DOCUMENT NUMBER: P09000093230
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
LINDA O I VIERIO  Name of Contact Person
MID TOWN CYCLES OF St. Cloud INC.
1206 DELAWARE AVE.
Address
St. Cloud FIA. 34769  City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
LINDA OliVERIO at 407, 891.1333
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certifi
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee, FI. 32314  Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

	ES OF STICK		<del></del>
( <u>Name o</u>	f Corporation as currer	ntly filed with the Florida Dept. of	State)
	<u> 09000093</u>	3230	
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts	s the following amendment(
A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional associat	ation "Corp," "Inc," or	"Co". A professional corporation	d" or the abbreviation
B. Enter new principal office address, i (Principal office address MUST BE A ST	f applicable: O	2823 DEERFIELD St. Cloub, Fl.	
		St. C10UD, P1.	34//
C. Enter new mailing address, if applie (Mailing address MAY BE A POST O			FILE SECTION AND COMMENTS OF THE PART OF T
D. If amending the registered agent and new registered agent and/or the new			8: 30
Name of New Registered Agent	LINDA	Oliverio	2.4
	2813 1 ==0	LFIELD St., St. Cloud	
	(Florida :	street address)	1 14. 34/67
New Registered Office Address:	2813 DEFRI	FIFEN St. Flo	rida 34771
	5+. 6/041), F1	FIELD St. Flo (City) 1 34771	(Zip Code)
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			the position.
	Amila	Muieno	
	Signature of New	Registered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = C. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each of held. President, Treasurer, Director would be 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. Ther 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 CharMike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:	move, and sauy sm	um, Sr us un Aua.	
X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	l <u>y Smith</u>	
Type of Action (Check One)	<u>Tide</u>	Name	Address
1) Change	V. Pres,	Frank Durren Oliverio	2823 Deerfield St.
Add Remove			St. Cloud, FL 3477
2) Change		<u> </u>	
Add Remove			
3) Change			M 8: 30
Remove 4) Change			
Add			
5) Change			
Remove			
6) Change			
Remove			

Attach additional sheets, if necessary,	). (Be specific)			
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				9,
f an amendment provides for an ex				SSX
provisions for implementing the an (if not applicable, indicate N/A)	nendment if not conta	ined in the amendm	ent itselt:	
(9 5,7,7,,)				
	<u></u>			<u> </u>
ALL ALLES FOLIA : NO	562000	0.10 00 01	- :	$\frac{1}{2}$ $\frac{1}$
THE COUNTY	<u> </u>	HND OK NE	Eldily CIC	LATELIT OTH
+ODAY OR IN	the futu	IRE ARE	to BE	(SSHEI) M
the warm of	1 :00 0 0	<u>-</u>	•	
the NAME OF	FINDA D.	OLIVERIO.		
LINDA B. OLVERI	n MAS 100	6 CONTROL	LiALA AHA	thoritu
OF ISSUED STOCK	OF MIDTO	WN CYCLE	SOF SAL	N+Cloud:
		•		

The date of each amendment(s) adoption: 6-10-19 date this document was signed.	, if other than
Effective date if applicable: 6 - 10 - 19	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	ال 19
by	<b>⊊</b> ™
(voting group)	7
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	M 8: 30
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	: : ::::::::::::::::::::::::::::::::::
Dated 6-10-19	
Signature J. Daven Oliverio Linda B. Whice	<u>no</u>
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
F. DARPEN Oliverio V.P., Linda B. OLIVE (Typed or printed name of person signing)	RIO, PRES.
1 yped or printed name of person signing)  1 A-anyan Angener V. P. Brigh B William (Title of person signing)	w Pres.