

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H190001264353)))



H190001264363ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

| | Division of Com Fax Number | rporations : (850)617-6380 |
|--------|-------------------------------|--|
| | | |
| From: | | |
| | Account Name | : EXPRESS CORPORATE FILING SERVICE INC. |
| | Account Number | : 12000000146 |
| | Phone | : (305)444-4994 |
| | Fax Number | : (305)444-4977 |
| | | |
| | | |
| *Enter | the email addres | s for this business entity to be used for future |
| anr | nual report maili | ngs. Enter only one email address please.** |

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN BIKE SHOP RACING, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$35.00 |



Electronic Filing Menu Corpor

Corporate Filing Menu

Help

APR 18 2019

T SCHROEDER

https://afile.sunbiz.org/scripts/afilcovr.axe

.

• •

- ,

.

•

Articles of Amendment to Articles of Incorporation

| BIKE SHOP RACING, INC: | ly filed with the Florida Dept. of State) |
|--|--|
| P11000056434 | in the second seco |
| | of Corporation (If known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | Flarida Profit Corporation adopts the following emondment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered." "professional association." or the abbreviation | "Co". A professional corporation name must contain the |
| · · · · · | 10760 NW 138th ST Ste 3 |
| B. <u>Enter new principal office address, it applicable;</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>) | Hjaleah Gardens, FL 33018 |
| C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | 10760 NW 138th ST Ste 3 Hizleah Gardens, FL 33018 |
| -D <u>If amending the registered agent and/or registered office ade</u> new registered agent and/or the new registered office addres | dress-in-Flor(da_onter-the-name-of-the |
| Name of New Registered Agent _ Change | of address. |
| Florida | irest address) |
| 10760 NW 138th ST Stz | 3 Hialeah Gardens 330 |
| New Registered Office Address: | |
| Thereby accept the appointment as registered agent. (I am amiliar | |
| Senature 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, 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 PTD.

Changes should be noted in the following manner. Currently John Dce 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.

| Exumple: <u>X</u> Change | <u>dol T9</u> | m <u>Doe</u> | | |
|--------------------------------------|--------------------|----------------------|---------------------------|-----|
| X Remove | <u>V</u> <u>Mi</u> | ke Jones | | |
| <u>X</u> Add | <u>\$V Sal</u> | ly Smith | · · · · | |
| <u>Type of Action</u> (Check One) | The | Name | <u>Addres</u> s | |
| 1) Change | VP | Alejandro Rico | 10760 NW 138th ST Ste 3 | |
| <u>x</u> Add | | | Hisleah Gerdens, FL 33018 | |
| Remove | | | | |
| 2) Change | D | Alancs Garzon Mendez | 10760 NW 138th ST Ste 3 | |
| Add | | + <u></u> | Histeah Gardeos, FL 33018 | |
| Remove | | | | |
| 3) × Change | PD | Pedro P Velcz | 10760 NW 138th ST Ste 3 | |
| Add | | | Hialesh Gardens, FL 33018 | · · |
| Remove | | | | |
| 4) Change | <u></u> | · | | |
| Add | | | 19 A | |
| Remove | | | METAR NHASS | |
| 5) Change | | | | Ē |
| Add | | | | 0 |
| Remove | | | | |
| 6) Change | | | <u>්</u> | |
| Add | - <u></u> * | | | - |
| Remove | | | | - |
| | | Page 2 of 4 | | |

• ,

| (Attach additional sheets, if necessary). (Be specific) | |
|---|---------------|
| | |
| · · · · · · · · · · · · · · · · · · · | |
| | |
| | |
| | |
| | |
| | _ |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | 233SEC |
| | |
| | |
| F. If an amendment provides for an exchange, reclassification, or cancellation of issued strates, | ARY OF |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate NA) | |
| | FLORIUA |
| | |
| · · · · · · · · · · · · · · · · · · · | |
| | |
| | |
| | |
| | |
| | |
| | |

.

.

.

.

.

• • •

.

| e date of each amendment(s) s to this document was signed. | doption: | , if other than the |
|--|---|-------------------------------|
| - | | |
| fective date if applicable: | (no more than 90 days after amendment file date) | |
| | (no nor o bur 90 days after amenament file acte) | |
| te) If the date inserted in this cument's effective date on the D | block does not meet the applicable statutory filing requirements, this department of State's records. | ate will not be listed as the |
| loption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amondment(s) was/were ac by the shareholders was/were s | opted by the shareholders. The number of vetes cast for the amendmont ufficient for approval. | (6) |
| The amendment(s) was/were ap must be separately provided for | proved by the sharebolders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s): | ent |
| "The number of votes cas | for the amendment(s) was/were sufficient for approval | |
| by | (voling group) | |
| | (voling group) | |
| action was not required. | opted by the board of directors without shareholder action and sharehold opted by the incorporators without shareholder action and shareholder | |
| (By a | frector, president cr other officer - if directors or officers have not been | |
| abbon Belcou | d, by an incorporator if in the hands of a receiver trustee, or other couled it duciary by that fiduciary) | rt- |
| | Pedro P Velez | 19 SEI |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |
| | | |

.