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## COVER<sup>1</sup>LETTEŘ

TO: Amendment Section Division of Corporations

Amendment Section

P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations

3

NAME OF CORPOR	ATION: <u>CYCIE</u>	Parts PI	JS, inc
DOCUMENT NUMB	ER:	DOO dalol1	<u> </u>
The enclosed Articles of	of Amendment and fee are su	ebmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Scott	Bitmar	)
•		Name of Contact Person	n
	CYCIE Par	45 PIUS I	NC.
•		Firm/ Company	
	2221 U.S.	9Z C.	
		Address	
Į	akeland	FL 3380	<u> </u>
		City/ State and Zip Cod	e e
cy	CLE POY IS PU	Sed for future annual report	notification)
For further information	concerning this matter, pleas	se call;	
		at (	_)
Name of Contact Person		Area Co	)de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment of State:
T/ 035 000 0	Пол. <del>- 1</del> гг. г. п		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee &	□\$52,50 Filing Fee
•	Certificate of status	Certified Copy (Additional copy is	Certificate of Status Certified Copy
		enclosed)	(Additional Copy
		chervaed)	is enclosed)
			•
Mailing Address		Street	Address

Amendment Section

Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

to

## Articles of Incorporation

 $\quad \text{of} \quad$ 

(Name of Corporation as currently	filed with the Florida Dept. of State)
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this $F_0$ its Articles of Incorporation:	forida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Criticipal office address <u>Frost 112 A GJ KELT ADDRESS)</u> (	500 500 
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addre	ss in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent Jean-Curt	is sturge 11
2221 U.S. 9	7 C.
(Florida stree	t address)
New Registered Office Address: 1 QK Claro	
	7,7
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position
Jun Shupe	

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 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> 14</u>	John Due	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
†) Change	<u>P</u>	Scott Bitman	n <u>8309</u> cosme
Kemove			<u>3355(j</u>
2) Change	P	Jean-curiis Sturg	e. 1ake1and
Remove			FI 33801
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
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<del>-</del>	
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	· · · · · · · · · · · · · · · · · · ·

te this document was signed.	, if other than t
fective date if applicable:	
(no more than 90 days after amendment file date)	
te: If the date inserted in this block does not meet the applicable statutory filing requirements, this cument's effective date on the Department of State's records.	fate will not be listed as t
coption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(8)
The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s).	vent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8 / 9 / 1 7	
Signature Dry Brown	
(By a director, president or other officer - if directors or officers have not beer	
selected, by an incorporator – if in the hands of a receiver, trustee, or other cot appointed fiduciary by that fiduciary)	ırt
SCOTT BITMON	
(Typed or printed name of person signing)	
president	
(l'itte af person signing)	