## P19000005382

(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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2021 JUL 20 AM 9: 08
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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: Bike Tech of Midtown, Inc. Name of Corporation	
DOCUMENT NUMBER: P19000005382	<u> </u>
The enclosed Statement of Change of Registered 0	Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Brooks Miller	
Name of Contact Person	
Brooks C. Miller PA	
Firm/Company	
100 SE 2d St Suite 3900	
Address	
Miami, FL 33131	
City/State and Zip Code	
bmiller@brooksmiller,com	
E-mail address: (to be used for future annual r	report notification)
For further information concerning this matter, pla	ease call:
Brooks Miller	at (305 )467-0376  Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the D	Department of State.
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR2E045 (04/13)

Tallahassee, FL 32314

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	uange is submitted for a corporation o	.0302, 007.1308, or 017.1308, Florida Statute rganized under the laws of the State of egistered agent, or both, in the State of Florida	
	f the corporation: Bike Tech of Midtov		<b>.</b>
2. The principa	office address: 1622 NE 2d Ave		
Miami, FL 3313	32		
4. Date of incor	rporation/qualification: January 16, 2	2019 Document number: P19000005382	<u></u>
	nd street address of the current register artment of State: (If resigned, enter res	red agent and registered office on file with the signed)	
	Spiegel & Utrera PA		
	1840 SW 22d St 4th Floor	2-C	2021
	Miami, FL 33145		<b>FIL</b> 2021 JUL 20
6. The name an (if changed):		agent (if changed) and /or registered office	₹ [
	Brooks Miller	FIA	و و
	100 SE 2d St Suite 3900		æ
	P.C	O. Box. NOT acceptable	
	Miami, FL 33131		
The street address changed will	ress of its registered office and the st l be identical.	reet address of the business office of its regis	stered agent,
Such change wauthorized by t	vas authorized by resolution duly add the board, or the corporation has bee	opted by its board of directors or by an office in notified in writing of the change.	r so
Free	pm Trice	Joyce M Freire President	
V	ure of an officer or director	Printed or typed name and title	
i juriner agree of my duties, ar document is be.	t the appointment as registered agen to comply with the provisions of all nd I am familiar with and accept the ing filed merely to reflect a change i s been notified in writing of this cha	statutes relative to the proper and complete political obligation of my position as registered agen in the revistered office address. I hereby continue the revistered office address. I hereby continue the revistered office address.	performance t. Or, if this firm that the
B.D		T	
Sig	gnature of Registered Agent	JULY 16, 2021	<u> </u>
If signing on be	ehalf of an entity:		
Brooks			
T	Typed or Printed Name		

\* \* \* FILING FEE: \$35.00 \* \* \*