		S S	DEPARTMENT OF S becretary of State SION OF CORPORATIONS	STATE	FILES 03 NOV 13 AM	1 10: 0 2
1. Corporati	MENT # P990 on Name ou of of Moton cycles		5788		O3 NOV T3 MI SECRETARY U TALLAHASSEE	FLÖRIDA
2. Principal 4601 Suite, Apt. #, City & State For 1-M. Zip 3390	jens - Flohion	3. Mailing Of S A Suite, Apt. #, (City & State	ffice Address M. C. AS PRIVE etc.	4. Date Inco	-0949258	Applied For Not Applicabl dditional Fee requir
	Name MIC N Street Address (P.O. Box Number is POS 5		KAYU	SA: 1000		
8. I, being a Signature of Registered A	Proket MYAA			<u></u>	State Zip Code FL 339// ion 607.0505 or 617.0503, F.S. Date 0 20	2003
Signature of Registered A 9. Names a	City FORT: MYEA ppointed the registered agent of the a		ration, am familiar with and ac	ist list at least 3 directors)	State Zip Code FL 339// ion 607.0505 or 617.0503, F.S. Date 0 20	
Signature of Registered A	City FORT: MYEA ppointed the repistered agent of the a gent and Street Addresses of Each Officer a Name of Officers and/or Director	EGUETERED GE and/or Director (Flou ors	ration, am familiar with and ac M MUST SIGN rida nonprofit corporations mu	est list at least 3 directors) ess of Each or Director	State Zip Code F.L. 3.39// ion 607.0505 or 617.0503, F.S. Date 0 20 City / State / Z City / State / Z	Zip 3393/ KACAT FC
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Signature of Registered A 9, Names a Titles	City FORT: MYEA ppointed the repistered agent of the a gent and Street Addresses of Each Officer a Name of Officers and/or Director	EGUETERED GE and/or Director (Flou ors	nation, am familiar with and ac MUST SIGN ida nonprofit corporations mu Street Addree Officer and/ COFficer and/ COFficer and/	Inst list at least 3 directors) ass of Each for Director	State Zip Code F.L. 3.39// ion 607.0505 or 617.0503, F.S. Date 0 20 City / State / Z City / State / Z	ар 3393/ КАСМ ГС В КАСМ А