Formonaura

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
(200	ournent (variber)	
Certified Copies	Certificates	of Status
Special instructions to F	Filing Officer:	
	Office Use Only	y



400091776314

03/12/07--01034--007 **78.75

SECRETARY OF STATE TALLAHASSEE, FLORIDA

MAY 21 PH 2:



W07-12469

COVER LETTER

TO:	New Filing Section Division of Corporations		
SUBJ	ECT: Southron Off-Road (Name of Corpora	Brcycle ASSOCI tion-must include suffix)	ation, INC.
Dear S	ir or Madam:		
Affairs	closed "Application by Foreign Not for Prof in Florida", "Certificate of Existence", and profit corporation to conduct its affairs in F	check are submitted to regist	
Please	return all correspondence concerning this m	atter to the following:	,
I	homas J. Saurei	of Person)	
	SORBA (Firm/	Company)	
	2125 Elachee	Dr.	
e sper	Gainesville, (SA Idress)	
	(City/State	3050Y and Zip Code)	
	, (City/State	and Exp Code)	
	ther information concerning this matter, plea		
The	(Name of Person) at	(678)7/7-367 (Area Code & Daytime Te	elephone Number)
	MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	New Filing Some Division of Company Community Community Series Se	Corporations ing ve Center Circle
Enclos	ed is a check for the following amount:		
\$7 0.	.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certificate of Status & Certified Copy



March 13, 2007

THOMAS J SAURET 2125 ELACHEE DR GAINESVILLE, GA 30504

SUBJECT: SOUTHERN OFF-ROAD BICYCLE ASSOCIATION, INC.

Ref. Number: W07000012469

We have received your document for SOUTHERN OFF-ROAD BICYCLE ASSOCIATION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Page one of your articles is not legible. Also the signature for the agent needs to be an original signature not a copy.,

The name and title of the person signing the document must be noted beneath or opposite the signature.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6931.

Letter Number: 407A00017647

Becky McKnight
Document Specialist
New Filing Section

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO . CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Southern Off-ROAD Bicycle Association, INC. (Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)
2. Georgia USA 3. 58-2271785 (State or country under the law of which it is incorporated) (FEI number, if applicable) 4. 3-131997 5. Per petual' (Duration! Year corp. will cease to exist or "perpetual")
6. 2-25-2007 or AS soon as registration is complete. (Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.) 7. 2125 Elychee De Goinesville, GA 30504 (Principal office address)
(Current mailing address) 8. 16 promote Sustainable tral paccess for mountain bizylists and to main hail they ride on (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)
Office Address: 1637 N Man Roast Reet Tallahassec, Florida 32303 PM (City)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:			
A. DIRECTORS			
Chairman: Thomas J. Sigures Executive Director SEE N			
Address: 2125 Elnehoe DR. Gainesville, GA 30504 Est in			
Gainesville, GA 30504 55 00			
Vice Chairman:			
Address:			
Director:			
Address:			
·			
Director:			
Address:			
B. OFFICERS			
President: Keith Own			
Address: 232 Deerfield Cir.			
Mount Airy, 6-A 30563			
Vice President: Angela Allen			
Address: 105 Whetstone CT.			
Mentinez, GA 30807			
Secretary: Eric Hunter			
Address: 495 MEAD ST. A+lanks, GA 30315			
Treasurer:			
Address:			
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.			
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)			
14. Themas J. Saurel, Civil war (Typed or printed name and capacity of person signing application)			

2.27 7

Control No. J922264

STATE OF GEORGIA

Secretary of State

Corporations Division
315 West Tower
#2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

SECRETARY OF STATE

CERTIFICATE OF EXISTENCE

I, Karen C Handel, Secretary of State and the Corporations Commissioner of the state of Georgia, hereby certify under the seal of my office that

SOUTHERN OFF-ROAD BICYCLE ASSOCIATION, INC

Domestic Non-Profit Corporation

was formed or was authorized to transact business on 11/17/1989 in Georgia. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



WITNESS my hand and official seal of the City of Atlanta and the State of Georgia on 24th day of February, 2007

> Karen C Handel Secretary of State

aun CHandel

Certification Number: 820502-2 Reference: Verify this certificate online at http://corp.sos.state.ga.us/corp/soskb/verify.asp

0