138006

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	/)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Megacycle Sport.	Inc.	
DOCUMENT NUM			
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Alina Maddox		
		Name of Contact Persor	1
	Megacycle Sport, Inc.		
		Firm/ Company	
	1390 S. W. 160 Avenue		
	<u></u>	Address	<u>. </u>
	Sunrise, Fl 33326		
		City/ State and Zip Code	2
	alina.maddox@att.net	,	
	_	sed for future annual report	notification)
For further informati Alina Maddox	on concerning this matter, pleas	se call: at (<u>954</u>	649-8148
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check (or the following amount made	payable to the Florida Depa	artment of State:
s35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED
2021 AUG 20 AM 11:32

Megacycle Sport, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) L38006 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s, 607.0120 (11) (e), F.S.

'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 <math>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>PT</u>	<u>John Doe</u>	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	S	Simon Londono	1390 S. W. 160 Avenue
x Add			Sunrise, Fl 33326
Remove			
2) Change		<u> </u>	
Add			
Remove 3.) Change			
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	heets, if necessary).	(Be specific)		
			 	
				
	<u> </u>			
 				
	 			
				
f an amendment	provides for an excl	hange, reclassification,	or cancell <u>ation of issu</u>	red shares,
provisions for im	plementing the ame	endment if not containe	d in the amendment i	itself:
(if not applice	able, indicate N/A)			
	<u> </u>		-n-	
				
				,
				<u> </u>
		······································		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : (no more than 90 de	nys after amendment file date)
Note: If the date inserted in this block does not meet the applicabl document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or boa action was not required.	rd of directors without shareholder action and shareholder
■ The amendment(s) was/were adopted by the shareholders. The nuby the shareholders was/were sufficient for approval.	imber of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders throug must be separately provided for each voting group entitled to vote	
"The number of votes east for the amendment(s) was/were s	ufficient for approval
by	
(voting group)	
Dated 8/16/21 Signature Alina Marchy	<u> </u>
Signature Alma Marlex	
(By a director, president or other officer selected, by an incorporator – if in the happointed fiduciary by that fiduciary)	- if directors or officers have not been
Alina Maddox	
(Typed or printed name	ne of person signing)
Secretary/Treasurer	
(Title of person signir	ng)