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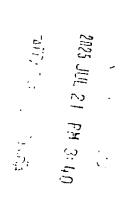
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Tallahassee Manitaia Bike Association, Inc
DOCUMENT NUMBER: N 1 000006469
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Deuglas 5. Bell (Name of Contact Person)
Tallahassee Mountain Bike Association (Firm/Company)
1700 N. Monroe St. Soite Il
Tallahussee, FL 32303 (City/State and Zip Code)
E-mail address: (to be used for fugure annual report notification)
For further information concerning this matter, please call;
Docylas 5 Bell at 850 510 7146 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to
Articles of Incorporation

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iallahassee Mountain Bik	e Associa	tion Inc	
(Name of Corporation as currently filed with the Florida	Dept. of State))	
N10000006469			
(Document Num	ber of Corporation (it	(known)	
Pursuant to the provisions of section 617.1006, Florida Statu amendment(s) to its Articles of Incorporation:	tes, this Florida Not	For Profit Corporation	adopts the following
A. If amending name, enter the new name of the corpora	ition:		
Southern Off Road Biorde	Association	Tallahassee	Chapter, La
Southern Off Load Bicycle name must be distinguishable and contain the word "corpore "Company" or "Co." may not be used in the name.	ation" or "incorpora.	ted" or the abbreviation	"Corp." or "Inc."
D. Fatonano missiant office address '6 and the			- 7
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>;</u>)		:
. Enter new mailing address, if applicable:			r
(Mailing address MAY BE A POST OFFICE BOX)			
). If amending the registered agent and/or registered off		la, enter the name of th	<u>e</u>
new registered agent and/or the new registered office	address:		
Name of New Registered Agent:		·	
New Registered Office Address:		(Florida street address)	
	(City)	, Florid: (Zin	a Code)
	•	(z.ijz	
lew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fi		nt the obligations of the	nacitian
yp upp wa regimered agent. Tamje	una utte	proceeding and	erestiten.
	Signature of New Regi	istored Agent if changing	

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.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee	g additio	onal Articles, enter change(s) here: essary). (Be specific)	
_			

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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filir	
document's effective date on the Department of State's records.	

(<u>CHECK ONE</u>) Adoption of Amendment(s)



The amendment(s) was/were adopted by the members and the number of votes east for the amendment(s) was/were sufficient for approval.

there are no memb adopted by the boa	ers or members entitled to vote on the amendment(s). The amendment(s) was/were rd of directors.
Dated _.	Joly 16, 2025-
Signature	
	By the chautian or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(1) spect of printed name of person signing)
	President
	(Title of person signing)