## NI6 0000004583

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AUG 24 2020 LALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: Track to Trail	Inc
DOCUMENT NUMBER: N16000004582	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Cynthia Gilbert (Name of Contact Person)	
(Name of Contact Person)	
Track to Trail	
(Firm/ Company)	
3847 2nd Aue SE	
Ncples FL 3417 (City/ State and Zip Code)	
(City/ State and Zip Code)	
track to trail thorough brace E-mail address: (to be used for future annual report notificat	Is a grant, com
For further information concerning this matter, please call:	)
Cyrthia Gilbert at 23 (Name of Contact Person) (Area Code	39 - 963 - 7296 (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department	
(Additional copy is Cerenclosed) (Additional copy is Cerenclosed)	.50 Filing Fee tificate of Status tified Copy ditional Copy is closed)
Mailing Address Street Address	
Amendment Section Amendment Section Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment

Articles of Incorporation of

Track -1	Tra	I IN	10
(Name of Corporation as currently filed with the Florida D	Dept. of State)	_	
NIII	004	583	
(Document Number	er of Corporatio	<u> </u>	
·	•		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this <i>Florida</i> i	Not For Profit Corp	noration adopts the following
A. If amending name, enter the new name of the corporati	ion:		
	NP	)	The new
name must be distinguishable and contain the word "corporat	tion" or "incor	porated" or the abb	
"Company" or "Co." may not be used in the name.	•		•
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)	)		<u> </u>
			1,- ,
		(	
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		<del></del>	<u> </u>
		\	
D. If amending the registered agent and/or registered office		lorida, enter the na	ame of the
new registered agent and/or the new registered office a	<u>ddress:</u>	10	
Name of New Registered Agent:		<u> </u>	
		(Florida street add	(ress)
New Registered Office Address:		)	
			, Florida
<del></del>	(City)		(Zip Code)
Now Desistered Assetts Signature if showing Degistered	A cont.		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	<u>ngent.</u> miliar with and	accept the obligation	ons of the position.
. , , ,			· •
Si	gnature of New	Registered Agent, i	f 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.

The borrow, and the more,	G. 12 17411, 177111,72, 1	77 WD WIT 11WW.	
Example:  X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	Title (was	Name O	Address
1) Kange Change Add	P (ugs s	Barbara Dann	1714 Kingslake Bh #102 Niades Fl 34112
Remove 2) Change Add		Robyn Bierdemann	
Remove Change Add Remove		David Beadle	1549 Sandaper St Vart 1 Nicoles, FL 34103
4) Change Add		Tennifer Marchiada	Wapies, FL 3-1108
Remove  5) Change Add	<u>S</u> _	Katchin look	Mades, FL 34116
Remove 6) Change Add			
E. If amending or adding (attach additional sheet)		cles, enter change(s) here: (Be specific)	

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<del></del> ,	<del></del>
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	P1-11-11-11-11-11-11-11-11-11-11-11-11-1
· · · · · · · · · · · · · · · · · · ·	
·	
	Remove David Beadle April 23 2020 Remove Dennifer Marchiena, April 23 2 Add Katelynn Cook June 30, 2020 in:
	Herrica Bacine
	Lemove Jehniter Marchianda April 23 2
	Add Kalel us Cont. That 20 2020
	14-20-11 COOK JUNE 30, 2020
The date of each amendment(s) adopti	on:, if other than the
date this document was signed.	1 ame
Effective data if annliantles	
Effective date <u>if applicable</u> :	the more than 00 days after amonds out 61s data?
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block de	oes not meet the applicable statutory filing requirements, this date will not be listed as the
document's effective date on the Department	
	S. Simila D. (Apolius).
Adoption of Amendment(s)	(CHECK ONE)

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

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
Dated
Signature  (By the chairman 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)
Cyrthia Gilbert  Typed or printed name of person signing)
(Title of person signing)