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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: Ridge Riders MOUNTAIN BILL ASSOCIATION	٨,
DOCUMENT NUMBER: N 98 00005680	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
(Name of Contact Person)	
Ridge Riders Mointain Bille Association (Firm/Company)	
5551 Russo Road	
Boxtow FL 33830 (City/ State and Zip Code)	
RRMBA @ Hughes . NET E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Charles Gibert at (863) 640-5875 (Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee & \bigcup \\$43.75 Filing Fee & Certificate of Status	
Mailing Address Amendment Section Street Address Amendment Section	

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

	es of Amendment to	FILED		
Ridge Riders Mountain 1 (Name of Corporation as currently filed with the Flo N 98 00005 (Document Number of Co	15 SOC 1774 To sind Dept. of State	JAN -9 AM 10: 22		
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida Not For Profit Corpor</i> d	ation adopts the following		
A. If amending name, enter the new name of the corporation	on:			
name must be distinguishable and contain the word "corporat "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)	205 Carey	The new riation "Corp." or "Inc." Place Fl 33803		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	205 Care Lakeland	Place F1 33803		
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: Char	les Gilbert Carry Place			
New Registered Office Address: Lalle (City)	(Florida street address)	33803 (Zip Code)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am far	Agent: Miliar with and accept the obligations	,		
Signature of New	Registered Agent, if changing			

Page 1 of 4

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	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Raymond Wells	5551 Russa Rd
Add Remove			Bartow Fl 33830
2) X Change		Charles Gilbert	205 Carey Place
Add Remove 3) Change	P	Charles Gilbert	33803 205 Carey Place
Add Remove 4) Change		Arthony Hechler	Lakeland F1 33803 P.O. Box 3062 Winter Haven. F1. 33885
Add			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

The date of each amendment(s) adoptate this document was signed.	tion:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendment(s)	
There are no members or member adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/were	
Dated	2.30-14	
Signature	1 Wills	<u></u>
have not been	or vice chairman of the board, president or other officer-if directors selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
RAY	mond WellS yped or printed name of person signing)	
(T	yped or printed name of person signing) President	
	(Title of person signing)	

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Corporate Name

RIDGE RIDERS MOUNTAIN BIKE ASSOCIATION, INC.

N98000005680

Document Number

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