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COVER LETTER

Division of Corporations NAME OF CORPORATION: ___BEYOND BIKES INC DOCUMENT NUMBER: P20000050256 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JENNA OFFERMAN Name of Contact Person BEYOND BIKES INC Firm/ Company 5588 EASTWIND DR. Address SARASOTA, FL 34233 City/ State and Zip Code fullmetalvanity@aim.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (941) 544-4869

Area Code & Daytime Telephone Number CATHERINE L. TRACY, CPA Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

TO: Amendment Section

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

BEYOND BIKES INC

(Name of Corporation as currently filed with the Florida Dept. of State)

P20	000050256				
	(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation	adopts the following amendmen		
A. If amending name, enter the new n	ame of the corporation:				
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	A professional cornoration	The new "or the abbreviation "Corp.," name must contain the word		
B. Enter new principal office address, if applicable:		6730 15TH ST. E.			
(Principal office address MUST BE A S	TREET ADDRESS)	UNIT K			
		SARASOTA, FL 34243			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6730 15TH ST. E			
		UNIT K			
		SARASOTA, FL 34243			
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office ac w registered office addre	ldress in Florida, enter the names:	ame of the		
	6730 15TH ST. E., UNI	ТК			
	(Florida	street address)			
New Registered Office Address:	SARASOTA		. Florida 34243		
		(City)	(Zip Code)		
New Registered Agent's Signature, if c I hereby accept the appointment as regis.	tered agent. I am familia	r with and accept the obligation			
· 	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 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	COLLUM, BRADLEY W.	5588 EASTWIND DR
Add			SARASOTA, FL 34233
Remove			
2) Change	TRE	OFFERMAN, JENNA	
Add			
X Remove Change	SEC	COLLUM, BRAD	
Add			
X Remove			
4) X Change	VP	OFFERMAN, JENNA	5588 EASTWIND DR
Add			SARASOTA, FL. 34233
Remove			
5)Change	DIR	COLLUM, BRAD	
Add			
X Remove			
6) Change	DIR	OFFERMAN, JENNA	
Add			
X Remove			

(Attacl	ending or adding a radditional sheets,	if necessary).	(Be specific	:)	•			
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provi	imendment provid sions for impleme if not applicable, in	<u>es for an eveh</u> nting the amer	ange, reclass	ilication, or c t contained in	<u>cancellation of</u> 1 <u>th</u> e amendm	<u>f issued shares,</u> ent itself:	•	
(if not applicable, in	dicate N/A)						
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The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this da Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder acti-	on and shareholder
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
√ selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other cour inted fiduciary by that fiduciary) JENNA OFFERMAN (Typed or printed name of person signing)	1
	Vľ	
	(Title of person signing)	