	ling Address:			
2109 NW 1S CAPE CORA	ST AVE. AL, FL, FL 33993 US			
FEI Number: 47-4329079			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent	:		
VARNER, DALE 2109 NW 1ST A CAPE CORAL,	FL 33993 US	ving its registered office or regis	torod agont, or both in the State of E	larida
2109 NW 1ST A CAPE CORAL, The above named	FL 33993 US	ing its registered office or regis	tered agent, or both, in the State of Fl	
2109 NW 1ST A CAPE CORAL, The above named	FL 33993 US	ing its registered office or regis	tered agent, or both, in the State of Fi	lorida. 03/02/2017 Date
2109 NW 1ST A CAPE CORAL, I The above named SIGNATURE	FL 33993 US d entity submits this statement for the purpose of change E: DALE VARNER Electronic Signature of Registered Agent	ying its registered office or regis	tered agent, or both, in the State of Fi	03/02/2017
2109 NW 1ST A CAPE CORAL, I The above named SIGNATURE	FL 33993 US d entity submits this statement for the purpose of chang E: DALE VARNER	ying its registered office or regis	tered agent, or both, in the State of Fi	03/02/2017
2109 NW 1ST A CAPE CORAL, I The above named SIGNATURE Authorized I	FL 33993 US d entity submits this statement for the purpose of change E: DALE VARNER Electronic Signature of Registered Agent Person(s) Detail :			03/02/2017
2109 NW 1ST A CAPE CORAL, I The above named SIGNATURE Authorized I Title	FL 33993 US d entity submits this statement for the purpose of change E: DALE VARNER Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	MGR	03/02/2017

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DALE VARNER

OWNER

03/02/2017

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L15000210353

Entity Name: DROP SHOT TENNIS LLC

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

2109 NW 1ST AVE. CAPE CORAL, FL, FL 33993

FILED Mar 02, 2017 **Secretary of State** CC0213003305

Date