

**L10000021505**  
Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC  
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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
A1A TENNIS LLC**

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JUN 23 2015

J. HARRIS

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

AIA Tennis LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/25/2010 and assigned  
Florida document number L10000021505

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: \_\_\_\_\_

(Principal office address MUST BE A STREET ADDRESS) \_\_\_\_\_

Enter new mailing address, if applicable: \_\_\_\_\_

(Mailing address MAY BE A POST OFFICE BOX) \_\_\_\_\_

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

Enter Florida street address

\_\_\_\_\_, **Florida** \_\_\_\_\_  
City Zip Code

New Registered Agent's Signature. If changing Registered Agent:

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

| <u>Title</u>                   | <u>Name</u>            | <u>Address</u>                 | <u>Type of Action</u>                   |
|--------------------------------|------------------------|--------------------------------|-----------------------------------------|
| MGRM/<br><u>Treasurer</u>      | <u>Chuck Narvin</u>    | <u>3659 QUAIL RIDGE DRIVE</u>  | <input checked="" type="checkbox"/> Add |
|                                |                        | <u>BOYNTON BEACH, FL 33446</u> | <input type="checkbox"/> Remove         |
|                                |                        |                                | <input type="checkbox"/> Change         |
| MGRM/<br><u>President</u>      | <u>DENNIS GRAINGER</u> | <u>3659 QUAIL RIDGE DRIVE</u>  | <input type="checkbox"/> Add            |
|                                |                        | <u>BOYNTON BEACH, FL 33436</u> | <input type="checkbox"/> Remove         |
|                                |                        |                                | <input type="checkbox"/> Change         |
| MGRM/<br><u>Vice President</u> | <u>BLAKE MERRELL</u>   | <u>3601 HAMLET DRIVE</u>       | <input type="checkbox"/> Add            |
|                                |                        | <u>DELRAY BEACH, FL 33445</u>  | <input type="checkbox"/> Remove         |
|                                |                        |                                | <input type="checkbox"/> Change         |
|                                |                        |                                | <input type="checkbox"/> Add            |
|                                |                        |                                | <input type="checkbox"/> Remove         |
|                                |                        |                                | <input type="checkbox"/> Change         |
|                                |                        |                                | <input type="checkbox"/> Add            |
|                                |                        |                                | <input type="checkbox"/> Remove         |
|                                |                        |                                | <input type="checkbox"/> Change         |

This image shows a single page from a notebook or ledger. It features ten evenly spaced horizontal blue lines across its width. The left edge of the page has several punch holes, suggesting it was part of a binder. There are some faint stains at the bottom right corner. No handwriting or other markings are present on the page.

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated June 22nd 2015

**Lauren Vadney, Attorney-in-Fact**

Typed or printed name of signee

**Filing Fee: \$25.00**

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