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(Address) (Address)	800339558008
(City/State/Zip/Phone #)	01/22/26++01016++013 ★•33.00
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TO: **Registration Section Division of Corporations**

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VINDEX TENNIS ACADEMY

SUBJECT: ___

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Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Frank Kalafatic		
	Name of Person		
	VINDEX TENNIS ACAD	EMY	
		Firm/Company	
	1100 SE 5th Ct #53		
		Address	
	Pompano Beach, FL 33	060	
	City/State and Zip Code		
	vindextennis@gmail.com		
	E-mail address: (to be used for future annual report noti	fication)
For further information co	oncerning this matter, please c	all:	
Frank Kalafatic		954 271-1076 at ()	
Name of Person			e Telephone Number
Enclosed is a check for th	e following amount:		
S25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address	<u>s:</u>	Street Address:	

Ma **Registration Section Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 19, 2020

FRANK KALAFATIC 1100 SE 5TH CT #53 POMPANO BEACH, FL 33060

SUBJECT: VINDEX TENNIS ACADEMY, LLC Ref. Number: L20000003808

We have received your document for VINDEX TENNIS ACADEMY, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II Supervisor

Letter Number: 220A00003730

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www.sunbiz.org

Division of Corporations - P.O. BOX 6397 - Tallahassee, Florida 39314 /

ARTICLES OF AMENDMEN	Г
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ARTICLES OF ORGANIZATIO	ON - ``
OF	U N
	- 04 3:39
VINEX TENNIS ACADEMY, LLC	20201117 -5 PH 3:39
(Name of the Limited Liability Company as it now appears or (A Florida Limited Liability Company)	n our record <u>s.</u>)
The Articles of Organization for this Limited Liability Company were filed on Decer	mber 23,2019 and assigned
Florida document number L2000003808	
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 desig	nation "/1.C" or the abbreviation "1.1.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, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	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: 1 · ·)

MGR = Manager AMBR = Authorized Member

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<u>Title</u>	Name	Address	Type of Action
AMBR	Jean Marc Bazanne	260 SW 8th Street APT 5 Pompano Beach, FL.	33 □Add
			🗆 Remove
		Name correction	Dehange
			🗆 Add
			🗆 Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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	NAME CHANGE/change name FROM Jeanne Marc Bazanne TO Jean Marc Bazanne.
	FIRST NAME: Jean Marc
-	LAST NAME: Bazanne
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E. Effective date, if other than the date of filing: _______(optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b) <u>Note:</u> 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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

January 16 Dated	2020	
	- Kdd-	
	Signature of a member or authorized representative of a member	
Frank Kalafatic		

Typed or printed name of signee