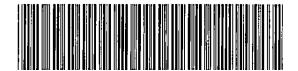


(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:

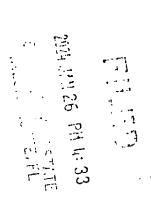
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COVER LETTER

TO: Registration So Division of Co			
ia tenni: Subject:	S LLC		
SUBJECT:	Name of Lim	ited Liability Company	_
The enclosed Articles of	Amendment and fee(s) are sub	emitted for tiling.	
	ondence concerning this matter	-	
	YAROSLAV VOZNENKO	0	
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	IA TENNIS LLC		
		Address	
	BOCA RATON, FLORIDA	A 33431	
		City/State and Zip Code	
	voznenko89@gmail.com		2024
	E-mail address: (to be used for future annual report notification)	- Company of the Comp
For further information c	oncerning this matter, please ca	all:	2024 144 26
YAROSŁAV VOZNEN	ко	723 8651951 at ()	iber C +
Name o	f Person	Area Code Daytime Telephone Nun	iber C 4:
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certif (additional copy is enclosed) Certif) Filing Fee. ficate of Status & fied Copy onal copy is enclosed)
Mailing Addres Registration S Division of C	Section	Street Address: Registration Section Division of Corporations	
P.O. Box 632		The Centre of Tallahassee	

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IA 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 November 13, 2023 and assigned Florida document number L23000513908 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

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 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>	Address	Type of Action
MGR	LITEHEART GROUP LLC	240 N COUNTRY CLUB BLVD BOCA RATON, FL 3348	7 ≡ Add
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Effective date, if other than the d If an effective date is listed, the date must be	ne specific and cannot be no	ior to date of filing or mo	(options re than 90 days after fill	ing) Pursuant to	ล์สาร ควอวิ ต
Note: If the date inserted in this bloc document's effective date on the Dep	k does not meet the app	licable statutory filing	requirements, this da	ate will not be	fisted as the
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January 22 Dated	, 2024	·			
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	ignature of a member or au	thorized representative of	of a member		_
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Yaroslav Voznenko					