

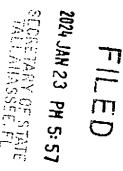
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COVER LETTER

TO: Registration Division of C	Section orporations		
R + B Te SUBJECT:	nnis, LLC		
SUBJECT.	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fec(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Brian C. Layman		
•		Name of Person	
	Layman Law Group, LLC		
		Firm/Company	
	4481 Munson St NW, Ste	301	
		Address	
	Canton, Ohio 44718		
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	brian@layman-lawgroup.co		
For further information	E-mail address: (concerning this matter, please c	to be used for future annual report not all:	ification)
Brian C. Layman		330 493-8833	
Name	of Person		ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 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 Addr. Registration		Street Address: Registration Se	ction
Division of	Corporations	Division of Cor	rporations
P.O. Box 63 Tallahassee,		The Centre of 7	
i aitailassee,	1 []2] [4	2410 N. Monro	e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R + B Tennis, LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our record ited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liability Comp	any were filed on	and assigned
lorida document number		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	liability company here:	
R + B Tennis II, LLC		
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC	or the abbreviation "L.L.C."
inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		⊙ · 28
		SECOND TO I
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		\$50 %
Taning address WAT DE ATOST OF THE BOXY		SSE T
		
. If amending the registered agent and/or registered offi	ice address on our records, enter	
gent and/or the new registered office address here:	et duares, on our records, enter	те напери същем теда
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	í
		orida
	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>	Name	Address	Type of Action
			□Add
			□Remove
			□Change
			□Remove
			Change
			□Add
		 -	□Remove
			☐Change
			□Add
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Effective date, if other than the lift an effective date is listed, the date in Note: If the date inserted in this document's effective date on the	block does not meet th	he applicable stati	filing or more than sutory filing require	(optional) 90 days after filing.) Pements, this date w	ursuant to 605,0207 (ill not be listed as t
ne record specifies a delay The 90th day after the re		but not an ef	fective time, a	t 12:01 a.m. or	n the earlier of
Dated January 17		24			
,,	\ \ \				
Jom (2 Day Drive	0/			
form-	Signartire of a nuembo	or authorized rep	resentative of a men	nber	

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