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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Bromley Tennis In	ne	¬		
	MBER: P21000068394			_	
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.			
Please return all cor	respondence concerning this ma	atter to the following:			
	Rodney C De Paz				
		Name of Contact Person	n		
	Bromley Tennis				
		Firm/ Company			
	4000 Towerside Terrace #10	12			
		Address			~>
	Miami, FLorida 33138			•	022
-		City/ State and Zip Code	e	 -	<u></u>
	rdpjames@gmail.com			:	2022 JUN 27
	E-mail address: (to be us	sed for future annual report	notification)	_	Ξ :
For further informat	ion concerning this matter, pleas	se call:			<u>5</u>
Rodney C De Paz		at (³⁰⁵) 4523063 de & Daytime Telephone N		
Nam	e of Contact Person	Area Co	de & Daytime Telephone N	umber	
Enclosed is a check	for the following amount made	payable to the Florida Depa	ariment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 8 assee, FL 32303	10	

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Bromley Tennis	Inc	
DOCUMENT NUMBER: P21000068394		
The enclosed Articles of Revocation of Dissolu	tion and fee are submitted f	or filing.
Please return all correspondence concerning this	s matter to the following:	
Rodney De Paz		
Name of	Contact Person	
Bromley Tennis		
Firm	v/Company	
4000 Towerside Terrace #1012		
	Address	.
Miami, Florida 33138		
City/Stat	e and Zip Code	
rdpjames@gmail.com		
E-mail address: (to be used for	or future annual report notification	on)
For further information concerning this matter, p	olease call:	
Rodney de Paz	305 5423063 At ()	
Name of Contact Person	Area Code & Daytime	e Telephone Number
Enclosed is a check for the following amount:		
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section	Street Address: Amendment Sectio	n

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

to Articles of Incorporation

Articles of Amendment of

	oration as currently	filed with the Florida Dept.	of State)
(Document Number of Corporation (if known)			<u></u>
(De	ocument Number of	Corporation (II known)	• .
ursuant to the provisions of section 607.1006, Flos Articles of Incorporation:	orida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the following amendment
. If amending name, enter the new name of the	he corporation:		
romley Kent, Inc			The new
ame must be distinguishable and contain the word lnc.," or Co.," or the designation "Corp," ", chartered," "professional association," or the a	Inc," or "Co". A		or the abbreviation "Corp.,"
Enter new principal office address, if applic	able:	N/A	
Principal office address MUST BE A STREET.			
			<u> </u>
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	E BOX)		
 If amending the registered agent and/or reg new registered agent and/or the new registe 		ss in Florida, enter the nam	e of the
N/A	red office address.		
Name of New Registered Agent			
	(Florida stree	t address)	
New Registered Office Address: N/A		,	Florida
	((Tity)	(Zip Code)
	70	.ity)	(Zip Code)
New Registered Agent's Signature, if changing	Registered Agent:		
hereby accept the appointment as registered age		th and accept the obligations	of the position.
	NIA		
	Signature of New Rec	gistered Agent, if changing	
	agains of the nate	and our recin, if changing	
Check if applicable			

 \Box The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Carla M Gomez	4000 Towerside Terrace #1012, M
X Add			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add		•	
Remove			
3) Change	• • •		
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
N/A	(as apregue)
	
	
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
	

Maria di Arra	June 21, 2022	
The date of each amendment(s) addate this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requiren partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes east for the ficient for approval.	amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The followach voting group entitled to vote separately on the amend	nwing statement ment(s):
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
bv	<u>, </u>	
•	(voting group)	
June 21, 202	2	
Dated		
Signature	1 hd	
(By a di	ector, president or other officer – if directors or officers had by an incorporator – if in the hands of a receiver, trustee, and fiduciary by that fiduciary)	
	Rodney C De Paz	
•	(Typed or printed name of person signing)	
	PTSD	
-	(Title of person signing)	