P95000016237

ATTORNEYS AND COUNSELORS AT LAW

430 NORTH MILLS AVENUE ORLANDO, FLORIDA 38803

IVAN M, LEPKOWITZ *

JEFFREY M, KOLTUN **

GWEN B, TOPHAM +

TELEPHONE (407) 428-1874 FACSIMILE (407) 428-1881

EFFECTIVE DATE

February 23, 1995

- * BOARD CERTIFIED IN TAKATION AND
- MASTER OF LAWS IN ESTATE PLANNING
- * ALSO ADMITTED IN MASSACHUSETTS

Secretary of State Bureau of Corporate Records P. O. Box 6327 Tallahassee, FL 32314 Attn: Corporations Division

600001416246 -02/27/95--01070--017 ****122.50 ****122.50

Re: Poling Tennis Camps, Inc.

Effective Date: February 23, 1995

Dear Sir or Madam:

Enclosed are the original and a duplicate copy of the Articles of Incorporation of this proposed corporation.

The duplicate copy has been subscribed and acknowledged by the subscriber in the same manner as the original. Please endorse your approval of the Articles of Incorporation on the duplicate copy, certify and return it.

Also enclosed is a certificate designating place of business or domicile for service of process within this State, naming agent upon whom process may be served.

A check is also enclosed in the total amount of \$122.50 to cover the \$35.00 filing fee, the \$52.50 fee for the certified copy of the Certificate of Incorporation, and the \$35.00 fee for designation of registered agent.

Yours very truly

Ivan M. Lefkowal

IML:sr Enclosures

cc: Mr. James F. Poling

: 20

KON 2-28

SECRETARY OF STATE DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

OF

95 FEB 27 AM 10: 20

EFFECTIVE DATE

→ 2-23-96

POLING TENNIS CAMPS, INC.

ARTICLE I - NAME

The name of this corporation is POLING TENNIS CAMPS, INC.

ARTICLE II - DURATION

This corporation shall exist perpetually, commencing on the date of execution of these Articles.

ARTICLE III - PURPOSE

This corporation is organized for the purpose of transacting any or all lawful business for which corporations may be incorporated under Chapter 607, Florida Statutes.

ARTICLE IV - CAPITAL STOCK

This corporation is authorized to issue 10,000 shares of \$1.00 par value common stock.

ARTICLE V - INITIAL REGISTERED OFFICE AND AGENT, AND CORPORATE ADDRESS

The street address of the initial registered agent of this corporation shall be:

430 North Mills Avenue Orlando, Florida 32803

The name of the initial registered agent of this corporation at that address shall be:

IVAN M. LEFKOWITZ

The street address of the corporate offices shall be:

121 Holiday Lane Cocoa Beach, Florida 32931

ARTICLE VI - INITIAL BOARD OF DIRECTORS AND OFFICERS

- A. This corporation shall have one (1) director initially. This number of directors may either be increased or diminished from time to time by the By-Laws but shall never be less than one (1).
- B. The name and address of the initial director and officer of this corporation are as follows:

Name	<u>Address</u>	<u>Office</u>
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JAMES F. POLING 121 Holiday Lane

121 Holiday Lane President/
Cocoa Beach, FL 32931 Secretary/
Treasurer/
Director

ARTICLE VII - INCORPORATOR

The name and address of the person signing these Articles are:

<u>Name</u> <u>Address</u>

IVAN M. LEFKOWITZ 430 North Mills Avenue Orlando, Florida 32803

ARTICLE VIII - BY-LAWS

The power to adopt, alter, amend or repeal By-Laws shall be vested in the Board of Directors and the shareholders.

ARTICLE IX - AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 23 day of FERRIARY, 1995.

IVAN M. LEFKOWITZ

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the corporation is: POLING TENNIS CAMPS, INC.
- 2. The name and address of the registered agent and office is:

IVAN M. LEFKOWITZ 430 North Mills Avenue Orlando, Florida 32803

Date: $\frac{\partial}{\partial 3}$, 1995

IVAN M. LEFKOWITZ Subscriber

ACCEPTANCE

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

Date: 2/23 , 1995

IVAN M. LEFKOWITZ

PLEASE READ A	LL INSTR	IUCTIONS B	EFURE C	OMPLETIN	G THIS FORM.	
PLEASE READ ALL INSTRUCTIONS BEFORE CO APPLICATION FOR FOR Secretary of State DIVISION OF CORPORATIONS				FILED		
DOCUMENT #1995(1700)10237				96 DEC 13 AM 8: 40		
1. Corporation Name				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
O Addison					,	
Principal Place of Business 703 Oxonga Ct. Rockledge Pt. 32955	703 Roc	Orange (2 Kladge 12	4 h 2955			
If above addresses are incorrect in any way, line thro	ugh incorrect inf	ormation and enter co	prection below.	4, Date Incorpo	DO NOT WRITE IN THIS S rated or Qualified ess in Florida	PACE
New Principal Office Address, if Applicable New Mailing Address, if Applicable Suite, Apt. #, etc. Suite, Apt. #, etc.			5 EEI Number		Applied For Not Applicable	
Crty & State	City & State	Country		6.	OF STATUS DESIRED	
Zip Country	Zip	'		<u> </u>		
7. Names and Street Addresses of Each Officer and/ Name of Officers and/or Directors	or Director (Flor	Stre Off 3 (Do NOT Us	et Address of Eac cer and/or Directo a Post Office Box	ch or Numbers)	City/5	State / Zip
Pres James F. Polivi	•		onse L		Rockledge	, Fl 32955
	J	104 Colo	nial Hous	e, Bayon	M. GocoaBea	ch, Fla 3294:
_	•	707 Ora	NGECH		Kochledga_	Fla. 32955
SedTa Marianine I- Poli	<u>ng</u>					OD.
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	·····	<u> </u>	RF	INSTA	EMENT	0 14
and the second Current	t Begistered Ac	pent	1 10		Address of New Register	d Agent
6. Name and Address of Current Registered Agent Name						
JAMES POLLY			s (P.O. Box Number	"0000203 12/18/96	-01028-019	
James Fraling 103 Orange Cr Rockledge Fla 32955 Gity City			FIC.	****383.	75 ****383.75	
KOCKI eage 1 d	SLY		City			
10. I, being appointed the registered agent of the a Signature of Registered Agent	pove sames con	rporation, am familiar	with and accept the	ne obligations of Se	Date 12/0	106
11. Does this corporation pay Dept. of Revenue under	5. 188.034	ngible tax to 2, Florida Sta		es 🔲 No	on	er side for information Entangible tax.)
12. I do hereby certify that the information supplied tease the Division of Corporations from any life certify that I am an officer or director or the rights reinstatement application the reason for tees owed by the corporation have been pair						