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CLERK OF STATE
TALLAHASSEE, FLORIDA

N. Culligan MAR 10 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FIFO PRODUCTIONS, LLC

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:

LAURI NELSON

Name of Person

TRIPLE BOND PRODUCTIONS, LLC

Firm/Company

12472 LAKE UNDERHILL RD #504

Address

ORLANDO, FL 32828

City/State and Zip Code

1LAURINELSON@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LAURI NELSON

at (407) 432-9581

Name of Person

Area Code

Daytime 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 ADDRESS:

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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated FEBRUARY 25, 2015



Signature of a member or authorized representative of a member

LAURI NELSON

Typed or printed name of signee

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Filing Fee: \$25.00

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