

L16000133117
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : LEGAL2COM.COM INC.
Account Number : 120010000062
Phone : (323) 962-8600
Fax Number : (323) 962-3889

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

2016 AUG -3 PM 3:00

TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
FINCH ENTERTAINMENT, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	06
Estimated Charge	\$55.00

AUG 04 2016
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: FINCH ENTERTAINMENT, 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:

CHEYENNE MOSELEY

Name of Person

LEGALZOOM.COM, INC.

Firm/Company

101 N BRAND BLVD., 11TH FLOOR

Address

GLENDAL, CA 91203

City/State and Zip Code

steveafinch@yahoo.com

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

For further information concerning this matter, please call:

CHEYENNE MOSELEY

Name of Person

800 773-0888 ext. 9724

at ()

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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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_____	_____	_____	<input type="checkbox"/> Add
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SECRET
16 AUG 2016 10:20
FALL 417
STATE
108114

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

ARTICLE IV: PLEASE AMEND THE LISTED ADDRESSES FOR

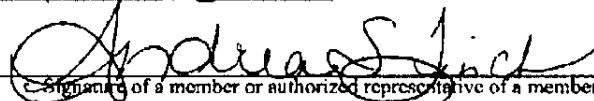
ANDREA S FINCH AND STEPHEN A FINCH TO:

15226 MERLINGLEN PLACE

LITHIA, FLORIDA 33547

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 July 26, 2016

Signature of a member or authorized representative of a member

ANDREA S FINCH

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SEAL OF THE FLORIDA
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA