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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Dana Szymanski dana.szymanski@cscglobal.com

Date: October 17, 2017

Order#: 871401/014

Re: FINITE HOLDINGS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

<u>XX</u> File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Dana Szymanski c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Florid I. N		company: FINITE HOLD!	NGS LLC		
2. (a)	anie of the filmted hability	company. Thirte the early	(b)		
. (a)	•	of limited liability company: E STREET ADDRESS)	(0)	Mailing address of limi (Note: MAY BE PO	
	19216 ROBIN PERC	H LANE		19216 ROBIN PERCH LAN	E
	TAMPA	FL 33647		TAMPA, FL 33647	
	04/24/2017			L17000090185	
3.		sistration in Florida	4.	Document numbe	r
5. (a)	KATIPALLI, MURALI I	(
/. (u)		ed Office shown on the records of	the Florida	Dept. of State:	
	- Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
	19216 ROBIN PERCH	LANE			<u>.</u> .
	TAMPA	FI	33647		17 OCT 15
(b)	Corporation Service Cor	npany			., 65
` /		d Agent and/or NEW Registered	d Office add	ress;	
	1201 Hays Street				
	NEW Registered Office Addre	rss:			··· ©
	Tallahassee	, FI	32301		
the cha agent was/w	ange or changes are made, will be identical. Or, in the ere authorized by an affirm	the Florida street address o case of a Florida limited F	f the regist iability cor of the limi	State of Florida, it is hereby of the confice and the business of the pany, it is hereby confirmed ted liability company or as of ability company.	office of the registere I that the change(s)
	MIESHA MCCLURE MIESHA		IA MCCLURE, AUTHORIZED PERSON		
Signa	ture of a member or authorized r	epresentative of a member	-	Printed or typed nam	
nranic	ione of all statutos rolativo	to the proper and complete	nortarma	in this capacity. I further agi nce of my duties, and I am fa hapter 605, F.S. Or, if this d nfirm that the limited liability	milior with and accer

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

BY: GRACE E. KIRBY, ASST. VICE PRESIDENT

Signature of Registered Agent Corporation Service Company