

L200000390903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

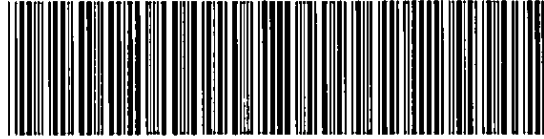
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
2021 AUG 19 AM 9:57
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2021 AUG 20 AM 12:13

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2021 AUG 19 PM 12:19

Amend
Name
chg

AUG 20 2021

ALBRITTON

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 948950 8328436

AUTHORIZATION

[Signature]

COST LIMIT : \$25.00

ORDER DATE : August 9, 2021

ORDER TIME : 10:39 AM

ORDER NO. : 948950-001

CUSTOMER NO: 8328436

DOMESTIC AMENDMENT FILING

NAME: MIDDLEFINGAMING, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS:

[Signature]

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Middlefingering, 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

Matthew Saunders
Name of Person

Firm/Company

8231 Princeton Square Blvd W
Address

Jacksonville/FL 32266
City/State and Zip Code

Stevinghard2426@gmail.com
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Saunders
Name of Person

at (305)
Area Code

763 5525
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2021 AUG 19 Fri 9:37

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

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

[illegible]

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There is no handwriting or other markings on the paper.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207(d)(1)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Matthew Saunders
Typed or printed name of signer

Filing Fee: \$25.00