

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P00823	
1. Entity Name UMG RECORDINGS, INC.	

FILED

09 APR -8 PM 3:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 100 UNIVERSAL CITY PLAZA UNIVERSAL CITY, CA 91608 US	Mailing Address C/O UNIVERSAL MUSIC GROUP PO BOX 5023 NEW YORK, NY 10150-5023 US
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



11082098 REINSTATEMENT 08-09

4. FEI Number 13-2613071	Applied For ☒ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

\$900.00 Reinstatement Fee	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P HOROWITZ, ZACHARY 2220 COLORADO AVENUE SANTA MONICA, CA 90404 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 600149166096 04/08/09--01003--026 **\$900.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GARCIA, SHARON 100 UNIVERSAL CITY PLAZA UNIVERSAL CITY, CA 91608 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/C MORRIS, DOUGLAS P 1755 BROADWAY, 7TH FLOOR NEW YORK, NY 10019 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV EPSTEIN, NORMAN 2220 COLORADO AVENUE SANTA MONICA, CA 90404 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P HENNY, MARINUS N 1755 BROADWAY, 5TH FLOOR NEW YORK, NY 10019 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CARNEY, JOSEPH 800 THIRD AVE, 6TH FL NEW YORK, NY 10022 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Asst. Secy Robert W. Moseley 800 Third Av 34 Fl New York NY 10022 ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Brian Bell 11/7/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #