

LAW OFFICES OF
DEWAYNE ZINKIN
5 RIVER PARK PLACE WEST, SUITE 203
FRESNO, CALIFORNIA 93720
Telephone: (559) 224-8100
Facsimile: (559) 224-8111

RECEIVED
FEDERAL ELECTION
COMMISSION
2012 AUG 14 PM 12:10
OFFICE OF GENERAL
COUNSEL

DEWAYNE ZINKIN
ATTORNEY AT LAW

RICHARD L. FAIRBANK
ASSOCIATE

August 7, 2012

Frankie D. Hampton
Paralegal Specialist
Federal Election Commission
Office of General Counsel, CELA Division
999 E Street, N. W.
Washington, DC 20463

Re: MUR 6606 – Attachments

Frankie,

Please find enclosed the original, executed copies of the attachments emailed to you this morning, 8/7/12. If you require any more information, please don't hesitate to contact our office.

Sincerely,


Kathy Copeland
Zinkin Offices

cc:

14044436143



FEDERAL ELECTION COMMISSION
999 E Street, NW
Washington, DC 20463

RECEIVED
FEDERAL ELECTION
COMMISSION

2012 AUG 14 PM 12:10

OFFICE OF GENERAL
COUNSEL

STATEMENT OF DESIGNATION OF COUNSEL
Please use one form for each Respondent/Entity/Treasurer.
FAX (202) 219-3923

MUR # 6606

NAME OF COUNSEL: Richard L. Fairbank

FIRM: Law Offices of Dwayne Zinkin

ADDRESS: 5 E. River Park Place West #203

Fresno, CA 93720

TELEPHONE- OFFICE (559) 224-8100

FAX (559) 224-8111

The above-named individual and/or firm is hereby designated as my counsel and is authorized to receive any notifications and other communications from the Commission and to act on my behalf before the Commission.

7/31/12
Date

[Signature]
Respondent/Agent -Signature

Title (Treasurer/Candidate/Owner)

NAMED RESPONDENT: Dwayne S. Zinkin

MAILING ADDRESS: 5 E. River Park Place West, #203
(Please Print)

Fresno, CA 93720

TELEPHONE- HOME () _____

BUSINESS (559) 224-8100

Information is being sought as part of an investigation being conducted by the Federal Election Commission and the confidentiality provisions of 2 U.S.C. § 437g(a)(12)(A) apply. This section prohibits making public any investigation conducted by the Federal Election Commission without the express written consent of the person under investigation



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FIRM: Law Offices of DeWayne Zinkin

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7/31/12
Date

[Signature]
Respondent/Agent -Signature

member
Title (Treasurer/Candidate/Owner)

NAMED RESPONDENT: Zinkin Entertainment, LLC

MAILING ADDRESS: 5 E. River Park Place West #203
(Please Print)

Fresno, CA 93720

TELEPHONE- HOME () _____

BUSINESS (559) 224-8100

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SECRETARY OF STATE

I, **BILL JONES**, Secretary of State of the State of California, hereby certify:

That the attached transcript of 1 page(s) has been compared with the record on file in this office, of which it purports to be a copy, and that it is full, true and correct.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of

DEC 31 2001

Bill Jones

Secretary of State

State of California

Bill Jones
Secretary of State

LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION

A \$70.00 filing fee must accompany this form.
IMPORTANT - Read Instructions before completing this form.

200136410056

File #

ENDORSED - FILED
in the office of the Secretary of State
of the State of California

DEC - 3 2001

BILL JONES, Secretary of State

This Space For Filing Use Only

1. Name of the limited liability company (and the name with the words "Limited Liability Company," "Ltd. Liability Co.," or the abbreviations "LLC" or "LLC.") ZINKIN ENTERTAINMENT LLC

2. The purpose of the limited liability company is to engage in any lawful act or activity for which a limited liability company may be organized under the Beverly-Killea limited liability company act.

3. Name the agent for service of process and check the appropriate provision below:

DEWAYNE S. ZINKIN, JR.

which is

☒ an individual residing in California. Proceed to item 4.

☐ a corporation which has filed a certificate pursuant to section 1505. Proceed to item 5.

4. If an individual, California address of the agent for service of process:

Address: 2377 W. SHAW AVE., SUITE 112

City: FRESNO

State: CA

Zip Code: 93711

5. The limited liability company will be managed by: (check one)

☐ one manager ☐ more than one manager ☒ single member limited liability company ☐ all limited liability company members

6. Other matters to be included in this certificate may be set forth on separate attached pages and are made a part of this certificate. Other matters may include the latest date on which the limited liability company is to dissolve.

7. Number of pages attached, if any:
NONE

8. Type of business of the limited liability company. (For informational purposes only)
SPORTS AGENT

9. **DECLARATION:** It is hereby declared that I am the person who executed this instrument, which execution is my act and deed.

[Signature]
Signature of Organizer

DEWAYNE S. ZINKIN JR.

Type or Print Name of Organizer

11/26/01
Date

10. RETURN TO:

DEWAYNE S. ZINKIN JR.

NAME

FIRM

ADDRESS

CITY/STATE

ZIP CODE

2377 W. SHAW AVE., SUITE 112

FRESNO, CA

93711



SEC/STATE (REV. 12/99)

FORM LLC-1 - FILING FEE \$70.00
Approved By Secretary of State

File with:	Brandi L. Orth FRESNO COUNTY CLERK 2221 Kern Street FRESNO, CA 93721 (559) 600-2575	(Space Below for Use by County Clerk Only) <div style="font-size: 48px; text-align: center;">FILED</div> <div style="text-align: center;">MAR 06 2012</div>
FICTITIOUS BUSINESS NAME STATEMENT		By <u>Victoria L. Villicana</u> FRESNO COUNTY CLERK DEPUTY
File No. 2201210001449		

THE FOLLOWING PERSON(S) IS(ARE) CONDUCTING BUSINESS AS

<input type="checkbox"/> NEW FILING	RENEWAL <input checked="" type="checkbox"/>
--	--

1) Fictitious Business Name(s): (Type or Print) Zinkin Entertainment	Phone (Optional) 559-224-8100
---	--------------------------------------

Street Address, City, State, Zip Code, County of Principal Place of Business (P.O. Box not acceptable)
 5 E. River Park Place West, Suite 203, Fresno, California 93720, Fresno County

Mailing Address (if different than above)

2) Full Name of Registrant Zinkin Entertainment, LLC	Residence Address 5 E. River Park Place West, Suite 203, Fresno, California 93720	Phone (Optional) 559-224-8100
---	--	----------------------------------

3) Registrant commenced to transact business under the Fictitious Business Name(s) listed above on: <input checked="" type="checkbox"/> (Date) 12/31/2001	4) Registrant has not yet commenced to transact business under the Fictitious Business Name(s) listed above. <input type="checkbox"/>	5) This business conducted by: Limited Liability Company
--	--	---


6) Articles of Incorporation (If Applicable) 200136410056	<input type="checkbox"/> This Statement has been executed pursuant to section 17919 of the Business and Professions code. (Do not publish this sentence unless box is checked).	
--	---	--

7) Type or Print Signature and Title DeWayne S. Zinkin, Managing Member	(Signed) <u><i>DeWayne S. Zinkin</i></u> <small>"I declare that all information in this statement is true and correct. (A registrant who declares as true information which he, or she knows to be false is guilty of a crime.)"</small>
--	---

THE FILING OF THIS STATEMENT DOES NOT OF ITSELF AUTHORIZE THE USE IN THIS STATE OF A FICTITIOUS BUSINESS NAME IN VIOLATION OF THE RIGHTS OF ANOTHER UNDER FEDERAL, STATE OR COMMON LAW (SEE SECTION 14411 ET SEQ. BUSINESS AND PROFESSIONS CODE)

8) Filed with the FRESNO COUNTY CLERK on: 04/11/2007 NOTICE: THIS STATEMENT EXPIRES ON:

BRANDI L. ORTH, COUNTY CLERK. <u>Victoria L. Villicana</u> Victoria L. Villicana, County Clerk Deputy	04/10/2017 A NEW STATEMENT MUST BE FILED PRIOR TO THE EXPIRATION DATE.
---	---

(SEAL) 	Space Below for Use of County Clerk Only - Do Not Publish Certification <div style="text-align: center;"> Certification I hereby certify that the foregoing is a correct copy of the original on file in my office. DATED: FRESNO, California Brandi L. Orth, COUNTY CLERK <div style="display: flex; justify-content: space-between;"> MAR 06 2012 <u>Victoria L. Villicana</u> Deputy </div> </div>
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Customer Copy Bank Copy Newspaper Copy Expires On: 04/10/2017 File No: 2201210001449 1 of 1



State of California Secretary of State

STATEMENT OF INFORMATION (Limited Liability Company)

Filing Fee \$20.00. If amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME (Please do not alter if name is preprinted.)

Zinkin Entertainment LLC

ENDORSED - FILED
In the office of the Secretary of State
of the State of California

DEC 22 2011

This Space For Filing Use Only

DUE DATE:

FILE NUMBER AND STATE OR PLACE OF ORGANIZATION

2. SECRETARY OF STATE FILE NUMBER

200136410056

3. STATE OR PLACE OF ORGANIZATION

CA

NO CHANGE STATEMENT



If there has been no change in any of the information contained in the last Statement of Information filed with the Secretary of State, check the box and proceed to Item 13.

If there have been any changes to the information contained in the last Statement of Information filed, or no Statement of Information has been previously filed, this form must be completed in its entirety.

COMPLETE ADDRESSES FOR THE FOLLOWING (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE

CITY AND STATE

ZIP CODE

5. CALIFORNIA OFFICE WHERE RECORDS ARE MAINTAINED (DOMESTIC ONLY)

CITY

STATE

ZIP CODE

CA

NAME AND COMPLETE ADDRESS OF THE CHIEF EXECUTIVE OFFICER, IF ANY

6. NAME

ADDRESS

CITY AND STATE

ZIP CODE

NAME AND COMPLETE ADDRESS OF ANY MANAGER OR MANAGERS, OR IF NONE HAVE BEEN APPOINTED OR ELECTED, PROVIDE THE NAME AND ADDRESS OF EACH MEMBER (Attach additional pages, if necessary.)

7. NAME

ADDRESS

CITY AND STATE

ZIP CODE

8. NAME

ADDRESS

CITY AND STATE

ZIP CODE

9. NAME

ADDRESS

CITY AND STATE

ZIP CODE

AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California address. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 11 must be left blank.)

10. NAME OF AGENT FOR SERVICE OF PROCESS

11. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

CITY

STATE

ZIP CODE

CA

TYPE OF BUSINESS

12. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

DeWayne S. Zinkin

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

SIGNATURE

Member

TITLE

12/15/11

DATE