A13000000161

(Re	equestor's Name)		
(Ad	Idress)	·	
(Ac	idress)		
(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Bu	usiness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	s of Status	
Special Instructions to Filing Officer:			
		i	

Office Use Only



300246140233

03/11/13--01026--018 **1000.00

SEURETARY OF STATE

2013 MAR 22 AM 0.

J. SAULSBERRY EXAMINER

MAR 28 2013

COVER LETTER

ТО:	Registration Section Division of Corporations				
SURJ	ECT: Fire Fund, LLP				
50170	Name of Florida Limited	Partnership or Limited I	Liability Limited Parti	nership	
The ei	nclosed Certificate of Limited Partr	nership and fees are	submitted for filin	ıg.	
Please	e return all correspondence concern	ing this matter to:			
Sha	ne Merali				
	Contact Person				
Fire F	Resources, Inc.				
	Firm/Company				
<u>118</u>	East Jefferson Street, Address	Suite 204		ALLA	77 UMU C107
Orla	indo, FL 32801			X 2	5
	City, State and Zip Code			<u> </u>	
928s	shane@gmail.com -mail address: (to be used for future annua			- TS	#IT 2: 10
E-	-mail address: (to be used for future annua	nl report notification)			·
For fu	irther information concerning this n	natter, please call:		25-	C
Sha	ne Merali	at (407	715-1592		
	Name of Contact Person	Area Code and	Daytime Telephone	Number	
Enclos	sed is a check for the following am	ount:			
	\$1,008.75 Filing Fees and Status \$1,008.75 Filing Fee and Certificate of Status	ees \$1,052.50 Filing and Certified Co		Copy, and	s,
Regist Divisi Cliftor 2661 I	EET ADDRESS: tration Section on of Corporations n Building Executive Center Circle passee, FL 32301	Registra Division P. O. Bo	NG ADDRESS: tion Section of Corporations x 6327 see, FL 32314		

CR2E030 (01/06)

CERTIFICATE OF LIMITED PARTNERSHIP FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

1. Fire Fund, LLP (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. 2, 118 East Jefferson Street, Suite 204 (Street address of initial designated office) Orlando, FL 32801 Marc D. Peltzman (Name of Registered Agent for Service of Process) 4.118 East Jefferson Street, Suite 204 (Florida street address for Registered Agent) Orlando, FL 32801 5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my dutic and I am familiar with and accept the obligations of my position as registered agent. 6.118 East Jefferson Street, Suite 204 (Mailing address of initial designated office) Orlando, FL 32801

7. If limited partnership elects to be a limited liability limited partnership, check box

8. Name and business address of ea Name:	ich general partner: <u>Business Address:</u>
F.I.R.E. Resources, Inc	2. 118 East Jefferson Street, Suite 204
	Orlando, FL 32801
	MI3 MAR 22
	or more than 90 days after the date the document is
Signed this 7 day of	or <u>March</u> , 2013
stated herein are true. I/We am/are a	We submit this document and affirm that the facts aware that any false information submitted in a se constitutes a third degree felony as provided for in
	<u> </u>
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75 Page 2 of 2