## U40005597

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## **COVER LETTER**

Division of Corporations		
Flame Invest, LLC		
Name o	f Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this m	patter to the following:	
Stephanie Fleming		
Name of Person	<del> </del>	
Firm/Company	<u>.</u>	
13194 US Highway 301 South Suite 106		
Address		
Riverview, FL 33578		
City/State and Zip Code		
fleminglawfirm@msn.com		
E-mail address: (to be used for future annual	report notification)	
For further information concerning this matter, ple	ease call:	
Stephanie Fleming	305 393-3584	
Name of Person	Area Code & Daytime Telephone Numbe	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following an	nount:	
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy	
INHS18 (2/14)		

## 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.

1. Na	ame of the limited liability company:	, LLC		
2. (a)	33 4th Street North	 (b) З	3 4th Street North	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	•
	Suite 201	<u>Sı</u>	uite 201	
	St. Petersburg, Florida 33701	St	. Petersburg, Florida 33701	<del></del>
	4/11/2014	L14	1000059756	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	Olivier Gamier			
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida Dep	t. of State:	
	7500 NW 25th Street			•
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	<del></del>	
	Suite 257			
	Miami, Fi	33122	<del></del>	
(Ь)	Stephanie Fleming		TĂLI	7 8
(0)	Enter name of NEW Registered Agent and/or NEW Registered	d Office addres	A)	
	13194 US Highway 301 South		ASSI	) 22 2.2
	NEW Registered Office Address:	····		्र २ ⊒
	Suite 106			1 <del>-</del> -
	Riverview	<sub>L</sub> 33578	FLORIDA	- T
the chagent was/was/was/was/was/was/was/was/was/was/	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited layere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the ature of member of the appropriate representative of a member set of accept the approximation as registered agent and as signs of all statutes relative to the proper and completingations of my position as registered agent as provided in writing of this change.	of the register liability composite of the limited liab LIANE	ed office and the business office of the registary, it is hereby confirmed that the change (a liability company or as otherwise provided ality company.	tered s) in

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