

L140000 59756

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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11:11 AM

COVER LETTER

TO: Registration Section
Division of Corporations

FLAME INVEST LLC

SUBJECT: _____
Name of 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 matter to the following:

PEYRONNET, Francis

Name of Person

FLAME INVEST LLC

Firm/Company

3030 N Rocky Point Dr. W, Suite 150

Address

TAMPA, FL 33607

City/State and Zip Code

francis@fp-ip.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

PEYRONNET, Francis **813** **580 9709**

Name of Person

at (_____) _____
Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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

FLAME INVEST LLC

1. Name of the limited liability company: _____	
2. (a) _____ Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) 5401 W KENNEDY BLVD TAMPA, FL 33609 12/22/2014	(b) _____ Mailing address of limited liability company. (Note: MAY BE POST OFFICE BOX) 957 ROUTE D'EAUNES 31870 BEAUMONT SUR LEZE, L14000059756
3. Date of filing/registration in Florida OEHLERKING, Steve	4. Document number
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State. RENT SOLUTIONS Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 5401 W KENNEDY BLVD, Suite 1030 TAMPA, FL 33609	
(b) Enter name of NEW Registered Agent and or NEW Registered Office address RICAUD, Vincent INVESTUS REALTY NEW Registered Office Address 1244 Ranchero Dr. SARASOTA, FL 34240	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

PEYRONNET, Francis

Signature of a member or authorized representative of a member:

Printed or typed name of signer

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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