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Office Use Only



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COVER LETTER

	istration Section ision of Corporations		
SUBJECT:	FIRETHEWIRE, LLC		
]	Name of Limited L	liability Company
Dear Sir or l	Madam:		
The enclose	d Registered Agent/Registered	Office Change and	fee(s) are submitted for filing.
Please return	n all correspondence concerning	g this matter to the	following:
Paul J. Ruper	-1		
	Name of Person		_
FIRETHEW	IRE, LLC		
	Firm/Company		
7932 Rupert	Orso Dr		
	Address		
Milton, Flori	da 32570		
	City/State and Zip Cod	e	- <u>-</u>
pjaratl@gma	il.com		
E-mail	address: (to be used for future	annual report notif	ication)
For further i	nformation concerning this mat	ter, please call:	
Paul J. Ruper	τ	850 at (7488348
	Name of Person		Area Code & Daytime Telephone Number
Reg Div P.O	iling Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enc	losed is a check for the follow	ing amount:	
a \$	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.

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by confirmed that after the office of the registered med that the change(s) as otherwise provided in
name of signee
name of signee agree to comply with the n familiar with and accept is document is being filed ility company has been