(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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2828 AUG -5 PM 2: 38

20.227

2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

Business Name & Document Number, (if k	(OFFICE USE ONLY) nown):
1. Fire Horse Ventures LLC_	
Name	Document Number (if known)
x Walk in	Pick up time
Mail out	Will wait
Photocopy	Certified Copy of Articles of Organization
	Certificate of Status
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit X Limited Liability Domestication Other -	AmendmentResignation of R.A. Officer/DirectChange of Registered AgentDissolution/WithdrawalMerger
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
Annual Report	Foreign Limited Partnership
Fictitious Name	Reinstatement
APOSTILCOUNTRY	Trademark Other
	Other

EXAMINER'S INITIALS: ___

COVER LETTER

TO:	New Filing Section Division of Corpo				
eun ie	Fire Horse Ve	ntures LLC			
SUBJE	.c.:	Name of	Limited Liabi	lity Company	
The end	closed Articles of Org	anization and fee(s)	are submitte	d for filing.	
Please	return all corresponde	ence concerning this	matter to the	following:	
	Andy Gaunce				
		<u> ·····</u>	Nam c o	f Person	
	Gaunce Law PL	I.C			
			FimVC	опрану	
	2525 1st Ave S				
			Add	ress	
	St Petersburg, F	L 33713			
	admin@gauncela	W. COIII	City/State a	ıd Zip Code	
			sed for fittue	annual report notificat	ion)
For furth	er information conce			-	
	Andy Gaunce	at :	727	614-0550	
	Name of	•	Area Code	Daytime Telephon	e Number
z1,	ed is a check for the fi 5.00 Filing Fee (ollowing amount. I\$130.00 Filing Fee Certificate of Status	Certif	55.00 Filing Fee & ied Copy aal copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing A New Filing			Street Address New Filing Section De	ivision

Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Momoe Street, Sui 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR Fire Horse Ventures LLC

ARTICLE I. Name

The name of the Limited Liability Company is Fire Horse Ventures LLC.

ARTICLE II. Address

The mailing and street address of the principal office of the Limited Liability Company is:

Principal Office	ce Address:	Mailing Address:

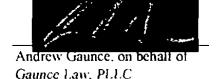
12157 W Linebaugh Avenue 12157 W Linebaugh Avenue Suite 417 Suite 417 Tampa, FL 33626 Tampa, FL 33626

ARTICLE III. Registered Agent, Office and Signature

The name and the Florida street address of the registered agent are:

Gaunce Law, PLLC 2525 1st Ave S St. Petersburg, FL 33712

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating 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, E.S.



ARTICLE IV. Manager

The name and address of the Limited Liability Company's Manager is:

Title:	Name and Address:
MGR	John C Laurie Living Trust UAD 5/23/1997, as amended

12157 W Linebaugh Avenue
Suite 417

Tampa, FL 33626

This document is executed in accordance with section 605.0203 (1)(b). Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S..

Andrew Gaunce, Authorized Representative