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(F	Requestor's Name)	
	Address)	
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(/	rtuuress)	
((City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
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(1	Document Number)	
Certified Copies	Certificates of	Status
Co o sist la staustica e	to Cilian Officer	
Special Instructions	to Filing Officer:	
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SECKETARY OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations			•	
Division of Corporations				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered	Office Change and	d fee(s) are submitted for fi	iling.	
Please return all correspondence concerning	g this matter to the	following:		
Nicolas Thompson				
Name of Person				
Fire Capital LLC				
Firm/Company				
300 Ridgewood Rd			2023 # SECH TAI	
Address			PR -	
Key Biscayne, FL 33149			7.88 € 1. 9	; ; ;
City/State and Zip Co	de			
nickt@firecapitalproperties.com			ATE II	
E-mail address: (to be used for future	annual report noti	fication)		
For further information concerning this ma	itter, please call:			
Nick Thompson	305 at (898-5642		
Name of Person		Area Code & Daytime	Telephone Number	
Registration Section Division of Corporations P.O. Box 6327		Registration Section Division of Corporat The Centre of Tallah 2415 N. Monroe Stre	assee eet, Suite 810	
Enclosed is a check for the follow	ving amount:			
■ \$25 Filing Fee	u :	S55 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.

1. Na	me of the limited liability company: Fire Capital LLC							
2. (a)	300 Ridgewood Rd	(b) 300 Ridgewood Rd			ewood Rd			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(~)		Mailing address (Note: MAY	s of limited liab ** BE POST OF	=	
	Key Biscayne, FL 33149	_		Key Bisca	iyne, FL 33149			
	March 10th, 2022]	L22000122	2117			
3.	Date of filing/registration in Florida	4.			Document n	umber		
5. (a)	United States Corporation Agents, INC				_			
	Registered Agent and Registered Office shown on the records of 5575 S. Semoran BLVD	the Flor	rida (Dept. of Stat	e:			
	Registered Office Address (MUST BE FLORIDA STREET 36	ADDRE	<u>:SS)</u>		_			
	Orlando , FI	32822	2		_	SE(202	
(b)	Nicolas Thompson					ORE L	3 APR	
(0)	Enter name of NEW Registered Agent and or NEW Registered	l Office	add	ress:	_	돌	+	
	300 Ridgewood Rd					ECRE INK! OF STAT TALLAHASSEE, FL	2023 APR -4 PH 3:	::)
	NEW Registered Office Address:				_	FL	<u>:</u>	•
	Key Biscayne , FI	33149)		_			
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of icles of organization or the operating agreement of the licelas Thompson Digitally signed by Nicolan Thompson Date: 2023,03 28 12:44-40-04-00	register register ability of the limite	erec con limit d lia	l office an ipany, it is ed liabilit	d the busines s hereby conf sy company o npany.	ss office of t firmed that t	he reg he cha	istered inge(s)
	ture of a member or authorized representative of a member			<u> </u>		ed name of sig	nee	
provisi the obl to mer	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I d'in writing of this change.	perfor d för i	mai n Cl	ice of my a apter 605	duties, and I 5. F.SOr. if	am familiar this docume	with o	ind accept eing filed
	Nicolas Thompson Date, 2023 03 28 12 44 55-04/00*							
Signatu	re of Registered Agent							

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