

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: On Fire Studios LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mauricio Duque

Name of Person

On Fire Studios LLC

Firm/Company

10887 Longleaf Woods Dr

Address

Orlando, FL 32832

City/State and Zip Code

ferchoduke@hotmail.com

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

For further information concerning this matter, please call:

Fernando Duque

305

5040862

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

\$30.00 Filing Fee &
Certificate of Status

\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

