## P14000017990

| (Request                       | tor's Name)     |        |
|--------------------------------|-----------------|--------|
| (Address                       | )               |        |
| (Address                       | )               |        |
| (City/Sta                      | te/Zip/Phone #) |        |
| PICK-UP                        | ] WAIT          | MAIL   |
| (Busines                       | s Entity Name)  |        |
| (Docume                        | ent Number)     |        |
| Certified Copies               | Certificates of | Status |
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SECRETARY OF STATE
OLL AHASSEF FLORING.

+A (Mange)
02-24-17

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** Fire Protection Products Inc. SUBJECT: Name of Corporation P14000017990 **DOCUMENT NUMBER:** The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Ghousia Khan Name of Contact Person Fire Protection Products Inc. Firm/Company 520 Brickell Key Drive, Apt. A1910 Address Miami, FL 33131 City/State and Zip Code gkhan8@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Ghousia Khan Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of char                      | nge is submitted                   | d for a corporation                         | organized under t                         | , or 617.1508, Florid<br>he laws of the State<br>or both, in the State (                                    | of Florida       | <u> </u>     |          |
|--|------------------------------------|---|---|---|------------------|--------------|----------|
| 1. The name of the                     | he corporation:                    | Fire Protect                                | ion Products                              | Inc.  |                  |              |          |
| 2. The principal                       |                                    | EOO Driekell                                | Key Drive, A                              |   |                  |              |          |
|  |                                    | Miami, FL                                   | 33131                                     |   |                  |              |          |
| 3. The mailing ac                      | ddress (if differ                  | ent):                                       |   |   |                  | <del>,</del> |          |
| 4. Date of incorp                      | oration/qualific                   | cation: Feb/20                              | 6/2014 <sub>Docum</sub>                   | nent number: P1   | 40000179         | 90           | _        |
|  |                                    | of the current regis<br>(If resigned, enter | ~ ~                                       | ristered office on file   | e with the       |              |          |
|  | United St                          | ates Corpora                                | tion Agents,                              | Inc.  |                  |              |          |
| ·                                      | 13302 W                            | inding Oak C                                | ourt A                                    |   |                  |              |          |
|  | Tampa, F                           | L 33612                                     |   |   | TALL             | 17·F         |          |
| 6. The name and (if changed):          | street address of                  | of the new register                         | ed agent (if change                       | d) and /or registered   | AHASSE TANY      | 7-FEB 24     | <u> </u> |
|  | Ghousia                            | Khan  |   |   |                  |              | ロコ       |
| -                                      | 520 Brick                          | . <u></u>                                   | e, Apt. A1910                             | )   | STATE<br>LORID   | 3: 22        |          |
|  | Miami, Fl                          |   | ox NOT acceptable                         |   |                  | `            |          |
| The street addre                       | ss of its registe<br>be identical. | red office and the                          | street address of the                     | he business office o  | f its registered | agent,       |          |
| Such change was<br>authorized by the   | s authorized by<br>e board, or the | resolution duly a<br>corporation has be     | dopted by its board<br>en notified in wri | d of directors or by ting of the change.  | an officer so    |              |          |
| Signatur                               | e of an officer or dire            | ector                                       | G   | housia Khan<br>Printed or typed name and  |                  |              |          |
| I further agrée to<br>performance of i | o comply with I<br>mv duties, and  | the provisions of a<br>I am familiar with   | ll statutes relative<br>and accept the ob | ct in this capacity.<br>to the proper and c<br>ligation of my posit<br>to the registered of<br>this change. | tion as register | ed<br>'      |          |
| _                                      | dome                               |   | Fe  | bruary 23rd, 2  | 017              |              |          |
| If signing on beh                      | ature of Registered A              |   |   | Date  |                  |              |          |
| Ту                                     | ped or Printed Name                | ;   |   |   |                  |              |          |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*

CR2E045 (03/12)