

1/18/2021

Division of Corporations

P210000233093234
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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**FLORIDA PROFIT/NON PROFIT CORPORATION
 SWANSON FIRE HOLDCO, INC.**

Certificate of Status	0
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Derrick Thompson
 1/20/21

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Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____
	_____		_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:


Name: JOHN P SWANSON
Address: 400 E BAY STREET, STE 1906
JACKSONVILLE, FL 32202

ARTICLE VII INCORPORATOR

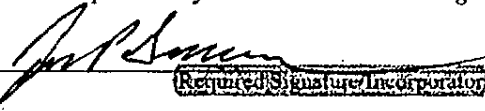
The name and address of the Incorporator is:

Name: JOHN P SWANSON
Address: 400 E BAY STREET, STE 1906
JACKSONVILLE, FL 32202

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

	<u>1-18-21</u>
(Required Signature Registered Agent)	(Date)

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

	<u>1-18-21</u>
(Required Signature Incorporator)	(Date)