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(R)	equestor's Name)	
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(Ad	ddress)	
(Ar	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to File	ing Officer:	
	J. HORNE	
	AUG - 2 2023	

Office Use Only



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FLORIDA CAPITAL COURIER SERVICES, INC				
2330 CLARE DRIVE				
TALLAHASSEE, FL 32309				
(850) 524–5437				
(850) 524–6243				
Please use funds from this account: 120210000160: \$35.00				
Authorization Signature:	Luca Fl	<u>:</u>		
Fire Breathers Inc.	P23000018406			
BUSINESS NAME	DOCUMENT #	<u>#</u>		
Certified Copy				
Certificate of Status				
<u>NEW FILINGS</u>	:	<u>AMMENDMENTS</u>		
Profit Corp Not for Profit Limited Liability Domestication Other CORP LLLP	- - - - - -	Amendment		
OTHER FILINGS	REGIS	TERATION/QUALIFICATIONS		
Annual Report		reign filing lification for LLP		
Fictitious Name	 `	einstatement		
APOSTILLE	Oth	er		
Country				
EXAMINER'S INITIALS:				

FLORIDA CAPITAL COURIER	SERVICES, INC			
2330 CLARE DRIVE				
TALLAHASSEE, FL 32309				
(850) 524–5437				
(850) 524–6243				
Please use funds from this account: I20210000160: \$35.00				
Authorization Signature:	Intelo	<u> </u>		
Fire Breathers Inc.	P23000018406			
BUSINESS NAME	DOCUMENT #			
Certified Copy Certificate of Status NEW FILINGS Profit Corp Not for Profit Limited Liability Domestication Other CORP LLLP	Ame 	endment signation of R.A. Officer/Director ange of Registered Agent vocation of Dissolution erger ticles of Conversion mended and restated Articles RANSMITTAL LETTER		
OTHER FILINGS	REGISTERA	ATION/QUALIFICATIONS		
Annual Report	Foreign fi	iling		
Fictitious Name	Quannicati Reinstate	on for LLP ement		
APOSTILLE	Other			
Country				
EXAMINER'S INITIALS:				

TRANSMITTAL LETTER

FIRE BREATHERS INC SUBJECT: (Name of Corporation) DOCUMENT NUMBER: P23000018406 The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Brett Isaac (Name of Person) (Name of Firm/Company) 2151 University Blvd S (Address) Jacksonville, FL 32216 (City/State and Zip Code) For further information concerning this matter, please call: Brett Isaac (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address:

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

Amendment Section Division of Corporations

TO:

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

OFFICER / DIRECTOR RESIGNATION 2023 Aug. ...

(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314