

P990000064363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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NOV 20 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Starfire Holding Corp
Name of Corporation

DOCUMENT NUMBER: P99000064363

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:

Michael Mann

Name of Contact Person

Starfire Holding Corp

Firm/Company

950 Peninsula Corporate Cir, Suite 3016

Address

Boca Raton, FL 33487

City/State and Zip Code

michael@starfireholding.com

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

For further information concerning this matter, please call:

Michael Mann

Name of Contact Person

at (561) 982-8812

Area Code & Daytime Telephone Number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 7, 2017

MICHAEL MANN
STARFIRE HOLDING CORP.
950 PENINSULA CORPORATE CIR - STE. 3016
BOCA RATON, FL 33487

SUBJECT: STARFIRE HOLDING CORP.
Ref. Number: P99000064363

We have received your document for STARFIRE HOLDING CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please be clear as to what changes you're making in filing the change of registered agent/office form. If you're not changing the registered agent information, file the enclosed amendment form for all other changes you wish to make.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 717A00022495

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17 NOV 20 PM 12:26
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Starfire Holding Corp
2. The principal office address: 950 Peninsula Corporate Cir, Suite 3016, Boca Raton, FL 33487
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/20/1999 Document number: P99000064363

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Michael Mann

7700 Congress Ave, Suite 1134

Boca Raton, FL 33487

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TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Michael Mann

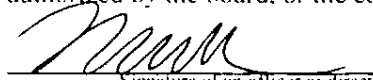
950 Peninsula Corporate Cir, Suite 3016

P.O. Box NOT acceptable

Boca Raton, FL 33487

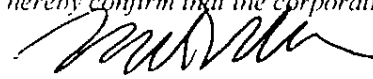
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

Michael Mann
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

11/13/17
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)