

F01000001959

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

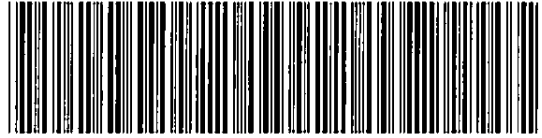
(Business Entity Name)

(Document Number)

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2024 APR 10 AM 11:58  
CLERK OF STATE  
TALLAHASSEE, FL

S. HUNT  
04/10/24

**COVER LETTER**

**TO:** Amendment Section Division of Corporations

**SUBJECT:** CHALLENGE TESTING, INC.

Name of Corporation

**DOCUMENT NUMBER:** F01000001959

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TOBY WATSON

Name of Contact Person

CHALLENGE TESTING, INC.

Firm/Company

4234 HALLS MILL RD.

Address

MOBILE, AL 36693

City/State and Zip Code

accounting@challengetesting.com

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

For further information concerning this matter, please call:

ASHLEY SMITH

at ( 251 ) 666-1435

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount.

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

**Mailing Address:**

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

**Street Address:**

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

2008 JUN 10 AM 11:59  
CORPORATE  
TALLAHASSEE, FL  
66

**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F01000001959

(Document number of corporation (if known))

1. CHALLENGE ENGINEERING & TESTING, INC.

(Name of corporation as it appears on the records of the Department of State)

2. ALABAMA

(Incorporated under laws of)

3. 04/11/2001

(Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 03/06/2023

5. CHALLENGE TESTING, INC.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	Add
_____	_____	_____	<input type="checkbox"/> Remove

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10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

\_\_\_\_\_  
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

TOBIAS WATSON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE \$35.00

Wes Allen  
Secretary of State

P.O. Box 5616  
Montgomery, AL 36103-5616

# STATE OF ALABAMA

**I, Wes Allen, Secretary of State of Alabama, having custody of the  
Great and Principal Seal of said State, do hereby certify that**

the entity records on file in this office disclose that Challenge Testing, Inc. was  
formed in Mobile County on August 18, 1993. The Alabama Entity Identification  
number for this entity is 000-158-681. I further certify that the records do not  
disclose that said entity has been dissolved, cancelled or terminated.

ED  
APR 10 AM 11:59  
OFFICE OF STATE  
TREASURER, FL



**In Testimony Whereof, I have hereunto set my  
hand and affixed the Great Seal of the State, at the  
Capitol, in the city of Montgomery, on this day.**

04/04/2024

**Date**

A handwritten signature in black ink, appearing to read 'Wes Allen', is written over a horizontal line.

20240404000006876

**Wes Allen**

**Secretary of State**