F23000	003674
(Requestor's Name) (Address)	900421306189
(Address) (City/State/Zip/Phone #)	
(Business Entity Name) (Document Number)	PH 1:23 SEELFL
Certified Copies Certificates of Status	MECEIVED MECEIVED
Office Use Only	R. HUNT C//23/20/



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000195
	REFERENCE	:	
	AUTHORIZATION	:	Smellenen
	COST LIMIT	:	\$ 35.00
ORDER DATE :	January 17, 2024		
ORDER TIME :	1:53 PM		
ORDER NO. :	270954-103		
CUSTOMER NO:	8400101		
	CHANGE OF A	<u>GEN7</u>	

NAME: ALLEGION US HOLDING III, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

EXAMINER'S INITIALS:

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

2. The principal office address: 11819 N. PENNSYLVANIA ST., CARMEL, IN 46032

		3000003674
		ile with the
C T CORPORATION SYSTEM		
1200 SOUTH PINE ISLAND ROAD		
PLANTATION	FL 33324	
	ment of State: (If resigned, enter resigned C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION	1200 SOUTH PINE ISLAND ROAD

Corporation Service Company				لات	
1201 Hays Street				РH	3
P/O/Box_NOF acceptable				÷:	-Ben 15
Tallahassee	FL	32301	FAT	23	

01/23/2024

Date

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.

Jeffrey N. Braun, Senior VP দ্য other or dire 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 an 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. Thereby confirm that the corporation has been notified in writing of this change.

Corporation Service Company	
BV: EMaga Potishi	
By: Signature of Registered Agent	
ing the second se	

If signing on behalf of an entity:

Grace E. Kirby, Asst. Vice President

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 (45/04/13)

CR2E045 (04/13)