Florida Department of State

Division of Corporations

Florida Department of State

Division of Gorporativity

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Account Number : FCA000000023
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Finter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

11:22	LLC REGISTERED AGENT RESIGNATION
	UNITED SEATING AND MOBILITY, L.L.C.

Certificate of Status	0
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DCC 12/13/23

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T. LEMIEUX Help **NOV 15 2023**

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Na	me of the limited liability company: United Seating a	ınd Mobilii	y, L.L.C.	
. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Ŋ	Mailing address of limited liability company: (Note: MAYBE POST OFFICE BOX)
	805 BROOK STREET		805 BROO	K STREET
	Rocky Hill, CT 06067		Rocky Hill	. CT 06067
	10/3/2000		M010000010)48
3.	Date of filing/registration in Florida	— 4.		Document number
5. (a)				
, (a)	Registered Agent and Registered Office shown on the records of REGISTERED AGENTS INC.	if the Florida	Dept. of State	:
	Registered Office Address (MUST BE FLORIDA STREET) 7901 4TH ST N. STE 300	"ADDRES!	<u></u>	
	ST. PETERSBURG , F	L_33702		
(b)	C T Corporation System			
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			2823 HOV
	C T Corporation System			- -
	NEW Registered Office Address:			
	1200 South Pine Island Road			Y E J I I
	Plantation, F	33324		#
he cha agent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	nws of the of the regi liability co of the lin	State of Flo stered office empany, it is nited liability	and the business office of the registered hereby confirmed that the change(s) y company or as otherwise provided in
	S/ TIMOTHY CASEY	TIM	OTHY CASI	EY, SECRETARY
-	ure of a member or authorized representative of a member			Printed or typed name of signee
попуше	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address, It in writing of this change. CT Corporation System		t in this cape cance of my c Chapter 602 onfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been
By:	re of Registered Agent	T()		