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(((H24000281959 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FIRST COAST CORPORATE SERVICES

Account Number : I20240000035 Phone : (904)490-0391 Fax Number : (706)310-8269

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

Email	Address:					

LLC REGISTERED AGENT CHANGE UNIFIED DOOR AND HARDWARE GROUP, LLC

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K. SALWelp

AUG 2 2 2024

COVER LETTER

	gistration Section ision of Corporations							
SUBJECT:	UNIFIED DOOR AND HARDWARE GROUP, LLC							
COMPLETE.		Name of Limited Liability Company						
Dear Sir or	Madam:							
The enclose	d Registered Agent/Registered Office	Change a	nd fee(s) are submitted for filing.					
Please retur	n all correspondence concerning this r	natter to th	ne following:					
	Name of Person							
Universal Re	rgistered Agents, Inc.							
	Firm/Company	•						
12900 MET	CALF, SUITE 140							
	Address							
OVERLANI) PARK, KS 66221							
	City/State and Zip Code							
INFO@UR/	AGENTS.COM							
E-mai	l address: (to be used for future annua	l report no	tification)					
For further	information concerning this matter, pl	ease call:						
КАТНҮ ВС	TLER Name of Person	at (855-236-9172					
	Name of Person		Area Code & Daytime Telephone Number					
Reg Div P.C	dling Address: gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enc	dosed is a check for the following ar	nount:						
- 9	S25 Filing Fee	ū	\$55 Filing Fee & Certified Copy					

INHS18 (2/14)

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. UNIFIED DOOR /	AND E	IA	RDWARE C	ROUP, LLC		
2. (:	a)		_	(b))			
		Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)			.\	Mailing address of limited liability company (Note: MAYBE POST OFFICE BOX)		
		1650 SUCKLE HWY			1650 SUCKLE HWY			
		PENNSAUKEN, NJ 08110	_		PENNSAU	KEN, NJ 08110		
		05/07/2015			M15000003 <i>6</i>	ş99)		
3.		Date of filing/registration in Florida	4.	-		Document number		
5. (- \	INCORP SERVICES, INC.						
J. (/	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 3458 LAKESHORE DRIVE						
		Registered Office Address		TALLAHASS				
		TALLAHASSEE FL	32312			AND 2		
(b)	b)	Universal Registered Agents, Inc.				FILEL FALLAHASSETTELUND		
		Enter name of NEW Registered Agent and/or NEW Registered Office address						
		1317 California Street				4: 20 FLoalo		
		<u>NEW</u> Registered Office Address						
		72 H s	22201					
		Tallahassee , FL	32304		· · · · · · · · · · · · · · · · · · ·			
chan agen was/ the a	ige it w we irti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law. Tilley, Secretary	registe bility of the li imited	ere cor imi Hi	d office and upany, it is ted liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
Sig	nat	ure of a member or authorized representative of a member	_			Printed or typed name of signee		
prov the c to m	usu obl ere	by accept the appointment as registered agent and agreeons of all statutes relative to the proper and complete pagations of the provided agent as provided ely reflect a change in the registered office address. I have the provided of the change in the registered office address. I have the second of the change.	e to a perfori for in ereby	ct ma 1 C co.	n this capa nee of my d hapter 605, ntirm that t	city. I further agree to comply with the lattes, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been		
Sign	រូវប	Kathy Bitler						