Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H230000107513)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:	Division of Co	nnonations.
		•
	Fax Number	: (850)617-6383
From:		
	Account Name	: REGISTERED AGENT SOLUTIONS INC
	Account Number	: I20100000062
	Phone	: (888)705-7274
		: (888)706-7274
*Enter	the email addres	ss for this business entity to be used for future
		ings. Enter only one email address please.**

LLC REGISTERED AGENT CHANGE FME US, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

FEB 13 2023

COVER LETTER

TO: Registration Section Division of Corporations	÷ •
SUBJECT: FME US, LLC	
	imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to the following:
Vanessa Castillo	
Name of Person	
Registered Agent Solutions, Inc.	
Firm/Company	
Corporate Center One, 5301 Southwest Pkw	vy. Ste 400
Address	
Austin, TX 78735	
City/State and Zip Code	
E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	e call:
Vanessa Castillo	888 705-7274
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amou	nnt:
□ \$25 Filing Fee	☐ \$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.

1. Na	me of the limited liability company: FME US,	LLC					
2. (a)	11 Lake Avenue	(b) 11 L	ake .	Avei	nue		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				limited ha		
	Floor 3	Floor	_		. 1 (0.17 (7)	71(2.00	<u> </u>
	Danbury, CT 06811-5258	Dank	oury,	СТ	068	11-52	258
	9/3/2021	M210	000	1182	20		
3.	Date of filing/registration in Florida	4.	Docum	ient nun	nber		
5. (a)	BLUMBERGEXCELSIOR CORPORATE SE	ERVICES, INC					
	Registered Agent and Registered Office shown on the records of the	e Florida Dept, of Sta	e:				
	155 Office Plaza Drive		_				
	Registered Office Address (MUST BE FLORIDA STREET AD	ODRESS)					
	1st Floor		_				
	Tallahassee _{FL} 3	32301					
(b)	Registered Agent Solutions, I	Inc.	_		₹ <u>6</u> .	2023 FF8	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice address:				00 141 14	
	155 Office Plaza Dr.		_			7	371
	NEW Registered Office Address:					PH	ED
	Suite A		-		- 2 - 2	- : ω	
	Tallahassee	32301	_		7.	6	

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

, ,	_	$\overline{}$		
/s/	Bruno	Pal	mier	7

Bruno Palmieri

Authorized Person

Signature of a member or authorized representative of a member

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent