## M23000005910

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## COVER LETTER

то:	Registration Section Division of Corporations				
CHDII	Fortis Industries, LLC				
SUBJ	Name of Limited Liability Company				
Dear S	ir or Madam:				
The en	closed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.			
Please	return all correspondence concerning t	his matter to the following:			
	Rebekah Suddler				
	Name of Person				
	Fortis Industries, LLC				
	Firm/Company				
	111 Marsheutz Ave SW				
	Address	<del></del>			
	Huntsville, AL 35801				
	City/State and Zip Code	<del></del>			
	ap@fortis.org				
1	E-mail address: (to be used for future a	nnual report notification)			
For fu	rther information concerning this matte	er, please call:			
Rebel	kah Suddler	256-489-5311			
	Name of Person	Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the following	ng amount:			
	☑ \$25 Filing Fee	S55 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.

	ame of the limited liability company: Fortis Industries  111 Marsheutz Ave SW	111 Mar	sheutz Ave SW	
?. (a)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  111 Marsheutz Ave SW  Huntsville, AL 35801		
	111 Marsheutz Ave SW			
	Huntsville, AL 35801			
	05/06/2023	M2300000	05910	
١.	Date of filing/registration in Florida	4.	Document number	
(a)				
. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept, of Sta	nte:	
	C T Corporation System			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	_	
	1200 South Pine Island Road			
	Plantation	33324	_	
	Plantation FI.	·	<u> </u>	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> InCorp Services, Inc	Office address:	FILE TALLAHASSI	
	NEW Registered Office Address:		- ASS	
	3458 Lakeshore Drive			
	Tallahassee I <sup>2</sup> 1	32312	SIAIE FLORIDE	
the cha agent was/w the art Signa I here	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the attree of a member or authorized representative of a member or authorized representative of a member or authorized representative of a member or authorized registered agent and agricultures of all statutes relative to the proper and complete ligations of my position as registered agent as provide ligations of my position as registered agent as provided.	I the registered office ability company, it of the limited liability company is limited liability control of the limited liability control of the limited liability control of the liability control	ce and the business office of the register is hereby confirmed that the change(s) ity company or as otherwise provided is impany.  Printed or typed name of signee apacity. I further agree to comply with and account of the complex with a complex w	

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00

Louise Breytenbach on behalf of InCorp Services, Inc.

Signature of Registered Agent