## P19000085615

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2022 FEB -7 AM II: 42
PALLAHASSEE, ALLERE

O SIMMON'S FEB 0 8 2022 CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 461679 8073277

AUTHORIZATION :

COST LIMIT : \$ 35,00

ORDER DATE: February 7, 2022

ORDER TIME : 9:26 AM

ORDER NO. : 461679-005

CUSTOMER NO: 8073277

## CHANGE OF AGENT

NAME: HEARTLAND CONTROLS

ENTERPRISE, INC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

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

statement of ch	ange is submitted for a corporat	, 617.0502, 607.1508, or 617.1508, Florida Statute ion organized under the laws of the State of Florida or registered agent, or both, in the State of Florida	3	
		CONTROLS ENTERPRISE, INC	•	
	office address: 19027 Jodi Roa			
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: November	er 4, 2019 Document number: P1900008561	5	
5. The name and		zistered agent and registered office on file with the		
	Coatar, Joseph T			2
	24280 Gallberry Drive		SECR TAL	022 FEB
	Venice	FL 34293		- B
6. The name and (if changed):		ered agent (if changed) and for registered office	33887 8 35 28	7 M 9:
	Corporation Service Company	/	215	G
	1201 Hays Street		ينا	တ
	Tallahassee	P.O. Box NOT acceptable		
	Tallattass <del>os</del>	Fl. 32301		
The street addre	ss of its registered office and the identical.	ne street address of the business office of its regist	ered agent,	
~		adopted by its board of directors or by an officer been notified in writing of the change.	so	
Thomson	Jan L	<del>_</del> , _	etary	
	e of an officer or prector	Printed or typed name and title		
I hereby accept I further agree to of my duties, and document is bein corporation has Corporation	the appointsher as registered a o comply with the provisions of I am familiar with and accept ag filed merely to reflect a chan been notified in writing of this a Service Company	ngent and agree to act in this capacity. All statutes relative to the proper and complete p the obligation of my position as registered agent, the in the registered office address, I hereby confi change.	erformance Or if this rm that the	
By: Aindrey	M. Baronce	02/07/2022	02/07/2022	
	anne of Registered Agent e, Assistant Vice President	Deic		
If signing on bel	nalf of an entity:			
Ту	ped 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 CR2E045 (04/13)