

**2023 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P21000084808

**Entity Name:** LENNOX MEDICAL SUPPLIES INC

**Current Principal Place of Business:**

7500 NW 25TH ST  
SUITE 241  
MIAMI, FL 33122

**Current Mailing Address:**

7500 NW 25TH ST  
SUITE 241  
MIAMI, FL 33122 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

LOUIS-CHARLES, COLSON  
7500 NW 25TH ST  
SUITE 241  
MIAMI, FL 33122 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** COLSON LOUIS-CHARLES

11/27/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LOUIS-CHARLES, COLSON  
Address 7500 NW 25TH ST  
SUITE 241  
City-State-Zip: MIAMI FL 33122

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** COLSON LOUIS-CHARLES

PRESIDENT

11/27/2023

Electronic Signature of Signing Officer/Director Detail

Date