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Division of Corporations

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To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : WARD, DAMON & POSNER, P.A.  
 Account Number : 072262000447  
 Phone : (561)842-3000  
 Fax Number : (561)842-3626

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

Email Address: dleitner@warddamon.com

LLC REGISTERED AGENT CHANGE  
 SIMPLE PATH MOVING LLC

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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. Name of the limited liability company: SIMPLE PATH MOVING LLC
2. (a) 160 W. Camino Real, Unit 836, Boca Raton, FL 33432
(b) 160 W. Camino Real, Unit 836, Boca Raton, FL 33432
Principal office address of limited liability company: Mailing address of limited liability company
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

3 5/3/2022 Date of filing/registration in Florida 4 H22000181705 Document number

5 (a) Ward Damon Business Services, LLC
Registered Agent and Registered Office shown on the records of the Florida Dept. of State,
4420 Beacon Circle, West Palm Beach, FL 33407
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
FL

(b) Michelle Robbins
Enter name of NEW Registered Agent and/or NEW Registered Office address:
160 W. Camino Real, Unit 836, Boca Raton, FL 33432
NEW Registered Office Address
FL

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 performed 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

[Signature] Dane Leitner, Authorized Representative
Signature of a member or authorized representative of a member Printed or typed name of signer

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

[Signature] Michelle Robbins
Signature of Registered Agent Michelle Robbins

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

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