

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000349922

**Entity Name:** SIMPLE LIFE MID ATL LLC

**Current Principal Place of Business:**

135 2ND AVE N  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

135 2ND AVE N  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number: 88-3759378**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	MCCANN, MICHAEL	Name	JACKSON, WOLFE
Address	135 2ND AVE N	Address	135 2ND AVE N
City-State-Zip:	JACKSONVILLE BEACH FL 32250	City-State-Zip:	JACKSONVILLE BEACH FL 32250

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MICHAEL MCCANN**

**MGR**

**03/27/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date