

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000003796

**Entity Name:** SIMPLISAFE, INC.**Current Principal Place of Business:**294 WASHINGTON STREET, 9TH FLOOR  
BOSTON, MA 02108**Current Mailing Address:**294 WASHINGTON STREET, 9TH FLOOR  
BOSTON, MA 02108 US**FEI Number:** 20-5367003**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
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

**Officer/Director Detail :**

Title	SECRETARY
Name	BLOCH, BRIAN
Address	294 WASHINGTON STREET, FLOOR 9
City-State-Zip:	BOSTON MA 02108

Title	PRESIDENT, DIRECTOR
Name	CERDA, CHRISTIAN
Address	294 WASHINGTON STREET 9TH FLOOR
City-State-Zip:	BOSTON MA 02108

Title	DIRECTOR
Name	GOETZ , STEFAN
Address	294 WASHINGTON STREET, 9TH FLOOR
City-State-Zip:	BOSTON MA 02108

Title	DIRECTOR
Name	LAURANS, CHARLES
Address	294 WASHINGTON STREET, 9TH FLOOR
City-State-Zip:	BOSTON MA 02108

Title	DIRECTOR
Name	MOTTE, ADRIEN
Address	294 WASHINGTON STREET, 9TH FLOOR
City-State-Zip:	BOSTON MA 02108

Title	DIRECTOR
Name	WASIM, TARIM
Address	294 WASHINGTON STREET, 9TH FLOOR
City-State-Zip:	BOSTON MA 02108

*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: BRIAN BLOCH****SECRETARY****02/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date