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## **COVER LETTER**

TO: Registration Section Division of Corporations

SUBJECT: SIMPLI-FLAUTOMATION INC.

Name of corporation - must include suffix

Dear Sir or Madam:

٠. . OP The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida." "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

ERNEST GRUMBLES		
	Name of Per	son
GRUMBLES LAW PLLC		
	irm/Compai	ıy
287 6TH ST EAST, SUITE 513		
	Address	
SAINT PAUL, MN 55101		
Ci	ty/State and .	Zip code
EGRUMBLES@GRUMBLESLAW.COM		
E-mail address: (to	be used for	future annual report notification)
For further information concerning this matter ERNEST GRUMBLES at (	612	465,8090
	Area Code	Daytime Telephone Number
<b>STREET/COURIER ADDRESS:</b> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount: Please make check payable to: FLORIDA DEPA		F STATE

**\$70.00** Filing Fee

□ \$78.75 Filing Fee & Certificate of Status

Certified Copy

\$87.50 Filing Fee, Certificate of Status & Certified Copy

#### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

## SIMPLI-FI AUTOMATION INC.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION." "Inc.," "Co.," "Corp," "Inc," "Co." or "Corp.")

(If name unavaila	able in Florida, enter alternate corporate name ac	lopted for the purpose of transacti	ng business in Florida)
DELAWARE	3.		
10/1/2023		(FEI number, if a	
(Date	of incorporation)	(Date of duration, if other	than perpetual)
ó		·	
	(Date first transacted business in (SEE SECTIONS 607.1501 & 607.150		lity)
424 Aberdeen Dr	ive, Davenport, FL 33896		
	(Principal office	e <u>street</u> address)	2024
	(Current mailing	address, if different)	
3. Name and stree	et address of Florida registered agent: (P.O.	Box <u>NOT</u> acceptable)	
Name:	Registered Agents Inc		ED PHI2:27 CF SIME
Office Address:	7901 4th St N STE 300		27
	ST. PETERSBURG	. Florida <u>33702</u>	
	(City)	(Zip code)	

#### 9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.



10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

# A. DIRECTORS

□Chairman	SEE ATTACHED PAPER Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		Director		
President		President		
□Vice President		□Vice President		
Secretary	Treasurer	Secretary		
Other	Other	□Other		Other
□Chairman	Name:	Chairman	Name:	_,
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		Director		
President		□President		
□Vice President		□Vice President		
Secretary	Treasurcr	□Secretary		□Treasurer
□Other	□Other	□Other		Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		Director		
□President		□President		
□Vice President		□Vice President		
Secretary	□Treasurer	Secretary		Treasurer
□Other	Other	□Other		Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

12. Chris Campbell 12. Chris Campbell (Aug 7, 1924 13,46 EDT)

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

#### CHRISTOPHER CAMPBELL, CEO, President 13.

Full Legal Name	Mailing Address - Building Number and Street Name	Mailing Address - City	Mailing Address - State	Mailing Address - Zip Code	Position
Christopher Aaron Campbell	424 Aberdeen Drive	Davenport	Florida	33896	President, Board Member
Patrick Deconinck	1213 Tamberwood Trail	Woodbury	MN	55125	Board Member
Michael W. Wright	4060 pipewood lane	Excelsior	MN	55331	Board Member
Amelia Ann Williams Hardy	3522 Richmond Parkway	Woodbury	MN	55129	Board Member
Alexander Ross	10005 Fox Run Rd	Woodbury	MN	55129	Board Member
Cordell Melvin Hardy	3522 Richmond Pkwy	Woodbury	MN	55129	Board Member
Johnny Cator	44 Curve St.	Wellesley	MA	02482	Board Member
Jerome Hamilton	370 Wabasha St. N Ste 615	Minneapolis	MN	55102	Board Member
William Dozier	709 Firethorn RD	Chesapeake		23320	Board Member

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SIMPLI-FI AUTOMATION INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FOR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIFTH DAY OF JUNE, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SIMPLI-FI AUTOMATION INC." WAS INCORPORATED ON THE FIRST DAY OF OCTOBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



Authentication: 203643010 Date: 06-05-24

Page 1

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