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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Simply SMOOTH Services LC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Michelle Goosby Name of Person			
Simply Smooth Servicer, LCC Firm/Company			
433 NW 15th Terrace Address			
Fort Lauderdale FL 33311 City/State and Zip Code			
E-mail address: (to be used for future annual aport notification)			
For further information concerning this matter, please call:			
Mullul Gooshy at 954 S60 2634 Area Code & Daytime Telephone Number			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clother Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:			
\$25 Filing Fee & Certified Copy			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

liability company submits the following statement in order agent, or both, in the State of Florida.	er to change its registered office or registered
1. Name of the limited liability company: Swydy	Smooth Servicer LLC
2. (a) Principal office address of limited liability company	y:
(Note: MUST BE STREET ADDRESS)	HOR LAWDONLAND STL 35311
(b) Mailing address of limited liability company:	- 555 6 F
(Note: MAY BE POST OFFICE BOX)	Fig. 3
3. Date of filing/registration in Florida	<u> </u>
5. (a) Registered Agent and Registered Office shown on	
Registered Agent:	Jerome
Registered Office Address:	HONT LOWISEDACE, PC3331/
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW Registered Agent</u> :	W Registered Office address: MUNDIE GOOSBY
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	433 WW 15th Terrace Any Landerdale FL 33311
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a member or anthorized representative of a member Jerome O. Jenkins Printed or typed name of signee	Florida street address of the registered office tical. Or, in the case of a Florida limited was/were authorized by an affirmative vote rwise provided in the articles of organization y.
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the provided and I am familiar with and accept the obligations of my pochapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company of the statute of Registered Agent	agree to act in this capacity. I further agree to oper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office sy has been notified in writing of this change.

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