

L12000 160032

(Requestor's Name)

(Address)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV 14 2013  
T. HAMPTON

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** **SIMPL Consulting Services LLC**  
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:

**Steve Clarence Christian**

Name of Person

**SIMPL Consulting Services LLC**

Firm/Company

**4803 SW 119th Ave.,**

Address

**Cooper City, FL 33330**

City/State and Zip Code

**steve.christian@simplconsulting.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Steve Clarence Christian** at ( **813** ) **5459397**

Name of Person

Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center 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

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

13 NOV 13 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

September 25, 2013

SIMPL CONSULTING SERVICES LLC \*\*\*\*\* 2ND MAILING \*\*\*\*\*  
% STEVE CLARENCE CHRISTIAN  
4803 SE 119TH AVE  
COOPER CITY, FL 33330

SUBJECT: SIMPL CONSULTING SERVICES LLC  
Ref. Number: L12000160032

We have received your document for SIMPL CONSULTING SERVICES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton  
Regulatory Specialist III  
Registration/Qualification Section

Letter Number: 613A00021379



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 11, 2013

STEVE CLARENCE CHRISTIAN  
4803 SE 119TH AVE  
COOPER CITY, FL 33330

SUBJECT: SIMPL CONSULTING SERVICES LLC  
Ref. Number: L12000160032

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Tammy Hampton  
Regulatory Specialist III  
Registration/Qualification Section

Letter Number: 613A00021379

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

*Pursuant to the provisions of sections 608.416 or 608.508, 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: SIMPL Consulting Services LLC

2. (a) Principal office address of limited liability company: 4803 SW 119th Ave.,

**(Note: MUST BE STREET ADDRESS)**

Cooper City, FL 33330

(b) Mailing address of limited liability company:

**(Note: MAY BE POST OFFICE BOX)**

4803 SW 119th Ave.,

Cooper City, FL 33330

12/26/2012

3. Date of filing/registration in Florida

L12000160032

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.

Registered Office Address:

13302 WINDING OAK COURT A

TAMPA, FL 33612

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:**

Steve Clarence Christian

**NEW Registered Office Address:**

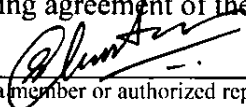
**(MUST BE FLORIDA STREET ADDRESS)**

4803 SW 119th Ave.,

Cooper City

,FL 33330

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 authorized 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 of a member or authorized representative of a member

Steve Clarence Christian

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 608, 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 of Registered Agent

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

**FILING FEE: \$25.00**