

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.
Account Number : I20160000086
Phone : (561)508-5033
Fax Number : (561)694-1639

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

LLC REGISTERED AGENT CHANGE SIMPLIFILE LC LLC

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Estimated Charge	\$25.00

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JUN 25 2020

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

1. The name of the limited liability company is: SIMPLIFILE LLC

2. (a) Principal office address of the limited liability company: 5072 N 300 W

(Note: MUST BE STREET ADDRESS)

PROVO UT 84604

(b) Mailing address of limited liability company: 5072 N 300 W

(Note: MAY BE POST OFFICE BOX)

PROVO UT 84604

12/22/2010

M10000005731

3. Date of filing/registration in Florida

4. Document number

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

Registered Agent:

Andrews, Kate

Registered Office Address:

3811 Sutters Mill Cir

Casselberry FL 32707

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

NEW Registered Agent:

United Agent Group Inc.

NEW Registered Office Address:

801 US Highway 1

(MUST BE FLORIDA STREET ADDRESS)

North Palm Beach FL 33408

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.

Nicholas Nichols
(Signature of a member or authorized representative of a member)

Nicholas Nichols, Attorney-in-Fact

(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 605, 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.

Nicholas Nichols
(Signature of Registered Agent)

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