

N13 0000006645

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

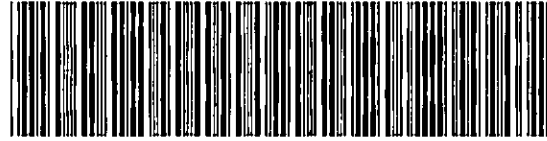
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500356525075

12/18/20--01020--008 **35.00

2021 FEB 12 PM 6:05

RALPH/ch8

FEB 02 '21

ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: THE ROBERT L SIMMONS FOUNDATION, INC.
Name of Corporation

DOCUMENT NUMBER: N13000006645

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TIMOTHY DEVLIN

Name of Contact Person

DBLLP

Firm/Company

2401 NW BOCA RATON BLVD

Address

BOCA RATON, FL 33431

City/State and Zip Code

TDEVLIN@DBLLP.COM

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

For further information concerning this matter, please call:

TIMOTHY DEVLIN

Name of Contact Person

at (561) 953-1520
Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: THE ROBERT L SIMMONS, INC.
2. The principal office address: 222 N OCEAN BLVD
DELRAY BEACH, FL 33483
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/22/13 Document number: N13000006645
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

J. DANIEL BREDE, ESQ
1900 NW CORPORATE BLVD #210E
BOCA RATON, FL 33431

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

TIMOTHY DEVLIN
2401 NW BOCA RATON BLVD
BOCA RATON, FL 33431

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Timothy A. Devlin

Signature of an officer or director

Timothy R. Devlin

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Timothy A. Devlin

Signature of Registered Agent

12/17/20

Date

If signing on behalf of an entity:

Timothy R. Devlin

Typed or Printed Name

*** * * FILING FEE: \$35.00 * * ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (04/13)