

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P03000029975

**Entity Name:** SIMPLY BILLING, INC.

**FILED**  
**Sep 15, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

415 CAMELIA TR  
SAINT AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

415 CAMELIA TR  
SAINT AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:** 14-1877306

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LESCROART, BRITTANY  
415 CAMELIA TR  
SAINT AUGUSTINE, FL 32086 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** BRITTANY LESCROART

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** MRS  
**Name:** LESCROART, BRITTANY  
**Address:** 415 CAMELIA TR  
**City-St-Zip:** SAINT AUGUSTINE, FL 32086

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** BRITTANY LESCROART

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

MRS.

09/15/2011

\_\_\_\_\_  
Date