## A0700001092

(Requestor's Name)		
(Address)		
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B. KOHR

**EXAMINER** 



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SECRETARY OF STATE DIVISION OF CORPORATIONS



1203 Governors Square Blvd. Tallahassee, FL 32301-2960 850 222 1092 tel 850 878 5368 fax www.ctlegalsolutions.com

June 6, 2011

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301 THEORETARY OF STATIONS
ON SECRETARY OF COMPOSITATIONS
ON 2: 35

Re:

Order #: 8162928 SO

Customer Reference 1: None Given Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

Campbell Investment Group, L.P. (FL) Change of Agent Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092. Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: <u>CAMPBELL INVESTMEN</u> Name of Limited Partne	IT GROUP, L.P. rship or Limited Liability Limited Partnership
DOCUMENT NUMBER: A0700000	1092
The enclosed Statement of Change of R fee(s) are submitted for filing.	egistered Office and/or Registered Agent and
Please return all correspondence concer	ning this matter to:
Contact Person	
Firm/Company	
Address	<u></u>
City, State and Zip Code	<del></del>
clr@bellsouth.net  E-mail address: (to be used for future annu	ual report notification)
For further information concerning this	matter, please call:
Name of Contact Person	at () Area Code and Daytime Telephone Number
Enclosed is a \$35.00 check made payab	
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314

INHS04 (01/06)

Tallahassee, FL 32301

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. CAMPBELL INVESTMENT GROUP, L.P.

Name of Limited Partnership or Limited Liability Limited Partnership			
2. 9/17/2007	A0700001092		
Date of filing/registration in Florida	Florida document number		
4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:			
Stephen M. Newman, P.A. Name			
7121 Fairway Drive, Suite	203		
Address	•		
Palm Beach Gardens, FL 3	3418		
City, State and Zip			
5. The name and Florida street address of the new registered age	ent and/or office:		
CT CORPORATION SYSTEM			
Name			
1200 S. Pine Island Road			
Florida street address (P.O. Box not acceptable)			
Plantation	FL_33324		
City, State and Zip			
6. Such change(s) is/are effective when filed by the Florida Department of State.			
- Kall			
Signature of General Partner Edward C. Campbell			
thereby accept the appointment as recistered agent and agree to comply with the provisions of all statutes relative to the proper a and I am familiar with an accept the obligations of my position of Signature of Registered Agent  Filing Fee: \$35.00  Certified Copy (optional): \$52.50	ind complete performance of my duties,		