## #1/2000045918

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K. SALY EXAMINER OCT 23 2012

## **COVER LETTER**

TO:	Registration Section Division of Corporations		
-			
SUBJ	IECT: Cam	pbell	Contracting LLC
	Name of I	imited	Liability Company
Dear	Sir or Madam:		
The e	nclosed Registered Agent/Registered C	Office C	Change and fee(s) are submitted for filing.
Please	e return all correspondence concerning	this m	atter to the following:
	Chris Campbell		
	Name of Person		
	Campbell Contracting LLC		<del></del>
	Firm/Company		
	1714 N. Armenia Ave, Ste I	3	
	Address		
	Tampa, FL_33607		
	City/State and Zip Code		
E	campbellcontractingllc@gmail. E-mail address: (to be used for future annual report n	com otificatio	n)
For fi	urther information concerning this matt	er, plea	ase call:
	Chris Campbell	_ at (	813 ) 365-8251
	Name of Person		Area Code & Daytime Telephone Number
	STREET/COURIER ADDRESS:		MAILING ADDRESS:
	Registration Section		Registration Section
	Division of Corporations		Division of Corporations
	Clifton Building		P.O. Box 6327
	2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314
	Enclosed is a check for the following	ng amo	ount:
	<b>✓</b> \$25 Filing Fee		\$55 Filing Fee & Certified Copy

## 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.

Name of the limited liability company:	Campbell Contracting LLC
2. (a) Principal office address of limited liability compa	any:
(Note: MUST BE STREET ADDRESS)	1714 N Armenia Ave., Ste B Tampa, FL 33607
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	1714 N Armenia Ave., Ste B Tampa, FL 33607
April 3, 2012	L 12000045918
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. of State:
Registered Agent:	Stratton Law Firm
Registered Office Address:	611 W Azeele St. Tampa, FL 33606
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	EW Registered Office address:  Christopher T Campbell
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1714 N Armenia Ave., Ste. B Tampa ,FL 33607
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company.	e Florida street address of the registered office
Signature of a member southorized representative of a member	
Chris Campbell — MGMR Printed or typed name of signee	
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.
Signature of Registered Agent	