

L17 000029747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

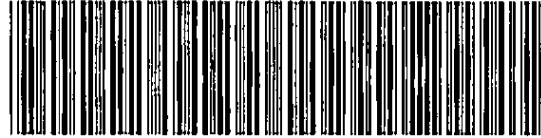
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400396334214

11/07/22--01012--012 **25.00

FILED

2022 NOV -7 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAMPOS FAMILY LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NATALIA MURGUETTO

Name of Person

Firm/Company

1450 BRICKELL BAY DRIVE APT 1003

Address

MIAMI, FL., 33131

City/State and Zip Code

nataliamurguetio@gmail.com

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

FILED
2022 NOV - 7 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FL

For further information concerning this matter, please call:

NATALIA MURGUETTO

321 2951139
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

Mailing Address:

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

Street Address:

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

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	NORTH MANAGEMENT LLC	3105 NW 107th Avenue, Suite 602-A	<input checked="" type="checkbox"/> Add
		Doral, FL, 33172	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	SOFA MURGUEITTO	3700 East Williams Field Road, Apt. 2051,	<input type="checkbox"/> Add
		Gilbert, AZ, 85295	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	NATALIA MURGUEITTO	1450 BRICKELL BAY DRIVE, APT 1003,	<input type="checkbox"/> Add
		MIAMI, FL, 33131	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
2023 NOV - 3 AM 4:5
SECRETARY OF STATE
TALLAHASSEE, FL

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

New manager of Campos Family LLC is North Management LLC.

FILED
2022 NOV -7 AM 9:45
SECRETARY OF STATE
TALLAHASSEE FL

E. Effective date, if other than the date of filing: November 3, 2022 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated November 3rd, 2022

Natalia Murguettio

Signature of a member or authorized representative of a member

NATALIA MURGUETTIO

Typed or printed name of signee