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COVER LETTER __

TO: Registration Section Division of Corporations	
Camclot Family Communities LLC SUBJECT:	
	Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change an	d fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the	c following:
Kymberly Kingdon	
Name of Person	
Camelot Family Communities LLC	
Firm/Company	
503 E. Jackson St. #155	
Address	
Tampa, FL 33602	
City/State and Zip Code	
glenn.pcarson2021@gmail.com	
E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter, please call:	
Kymberly Kingdon 603 at (560-2709
Name of Person	Area Code & Daytime Telephone Number
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
Enclosed is a check for the following amount:	
■ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

(a)	503 E. Jackson St.		(b) 50	3 E. Ja	ickson St.
	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)	ıy:	(0)		Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)
	#155		#15	55	NEW TOTAL BOX
	Tampa, FL 33602		Tan	npa, Fl	L 33602
	06/26/2017		L170	000137	7964
(a)	Date of filing/registration in Florida Comingore, Chad	4.			Document number
(u)	Registered Agent and Registered Office shown on the reco	rds of the Florid	da Dept.	. of Stat	 te:
	Registered Office Address (MUST BE FLORIDA STR Suite 340	EET ADDRES	<u>.s)</u>		_
	Brandon	33511			_
D) _	HAUGHEY, R.J. II Enter name of NEW Registered Agent and/or NEW Regis	itered Office ad	ldress:	·	- 26
D) _	HAUGHEY, R.J. II Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u> 401 EAST JACKSON STREET	itered Office ad	<u>ldress</u> :		350 XET 100 2023 JUN
o) <u>-</u>	Enter name of NEW Registered Agent and/or NEW Regis	tered Office ad	idress:		FIL SECRETARY OF C 2023 JUN 30
o) <u>-</u>	Enter name of NEW Registered Agent and/or NEW Registered Agent and New Registered Agent	tered Office ad	<u>idress</u> :	-	FILED SECRETARY OF OF CORP 2023 JUN 30 PA
D) _	Enter name of NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered 401 EAST JACKSON STREET NEW Registered Office Address:	. FL 33602	1dress:		ORIGINAL TO THE PROPERTY OF TH
: lin ge (L wi wer rtiel	Enter name of NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Office Address: SUITE 2225 TAMPA mited liability company is not organized under the or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the membiles of organization or the operating agreement of	. FL 33602 e laws of the the registered liability coers of the limited L	State ed offi ompany sited li	of Flo	orida, it is hereby confirmed that after the business office of the registered thereby confirmed that the change(s) of company or as otherwise provided ipany.
e lin ge (l wir wer rticl	Enter name of NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Office Address: SUITE 2225 TAMPA mited liability company is not organized under the or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the membels of organization or the operating agreement of the organization of the operating agreement of the organization of authorized representative of a member of authorized representative of a member of authorized representative of a member.	. FL 33602 e laws of the fine registered liability coers of the limited I. Kym	State ed offi impany sited li iability hberly l	of Flo ce and y, it is ability y com Kingdo	orida, it is hereby confirmed that after the business office of the registered thereby confirmed that the change(s) y company or as otherwise provided pany. Printed or typed name of signee
e linge (Lwireling)	Enter name of NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Agent and/or NEW Registered Office Address: SUITE 2225 TAMPA mited liability company is not organized under the or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limite authorized by an affirmative vote of the membiles of organization or the operating agreement of	FL 33602 e laws of the fine registered liability coers of the limited L. Kym.	State ed officempany ited li iability inberly i	of Floce and y, it is ability y com Kingdo	orida, it is hereby confirmed that after the business office of the registered thereby confirmed that the change(s) we company or as otherwise provided upany. Printed or typed name of signee activ. I further agree to comply with