

L17000200546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

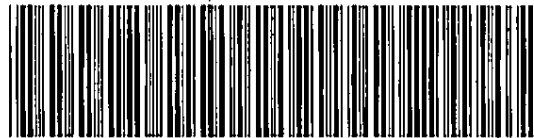
(Business Entity Name)

(Document Number)

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18 JAN 11 PM 12:09

STATE  
TALLAHASSEE, FLORIDA

J. LEGGETT  
JAN 12 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 22, 2017

CHARLES CAMPBELL  
7775 NW 22ND STREET APT 204  
PEMBROKE PINES, FL 33024 US

SUBJECT: MAVERICK HOMES LLC  
Ref. Number: L17000200546

We have received your document for MAVERICK HOMES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett  
Regulatory Specialist II  
Registration Section

Letter Number: 617A00025969

RECEIVED  
JAN 12 2018



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 7, 2017

CHARLES CAMPBELL  
7775 NW 22ND STREET APT 204  
PEMBROKE PINES, FL 33024 US

SUBJECT: MAVERICK HOMES LLC  
Ref. Number: L17000200546

We have received your document for MAVERICK HOMES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Judy A Leggett  
Regulatory Specialist II  
Registration Section

Letter Number: 517A00022497

2017 DEC 22 AM 11:23

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: MAVERICK HOMES 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:

CHARLES CAMPBELL

Name of Person

Firm/Company

7775 NW 22ND STREET APT 204

Address

PEMBROKE PINES, FL 33024

City/State and Zip Code

CCAMPB@MSN.COM

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

For further information concerning this matter, please call:

CHARLES CAMPBELL

954

6467136

at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee      ☐ \$30.00 Filing Fee & Certificate of Status      ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)      ☐ \$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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

MAVERICK HOMES LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/27/2017 and assigned Florida document number L17000200546.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

CHARLES CAMPBELL

New Registered Office Address:

7775 NW 22ND STREET APT 204

*Enter Florida street address*

PEMBROKE PINES

*City*

Florida 33024

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

  
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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	CAROL CAMPBELL	7775 NW 22ND ST #204	<input checked="" type="checkbox"/> Add
		PEMBROKE PINES FL	<input type="checkbox"/> Remove
		33024	<input type="checkbox"/> Change
MGR	CHARLES CAMPBELL		<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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18 JAN 11 PM 12:10  
STATE OF FLORIDA  
TALLAHASSEE

FILED  
JAN 11 PM 12:10  
18  
ST. JAMES  
TALLAHASSEE FLORIDA

(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)

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 Jan 8th 2018

Charles Campbell

Signature of a member or authorized representative of a member

CHARLES CAMPBELL

Typed or printed name of signee