

L18000044838

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

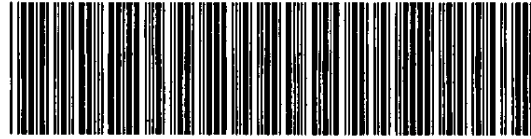
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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18 APR 16 AM 10:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K SALY  
APR 18 2018

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CMC Photograpy, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Amendment or Cancellation of Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cierra Camper

Name of Person

CMC Photograpy, LLC

Firm/Company

8323 Klondyke Rd

Address

Youngstwon, FL 32466

City/State and Zip Code

cmcphotographypcfl@gmail.com

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

For further information concerning this matter, please call:

Cierra Camper

Name of Person

at ( 850 ) 387-5720

Area Code

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

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

**AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY**

Pursuant to section 605.0302(2), Florida Statutes, this limited liability company submits the following:

**FIRST:** The name of the limited liability company is: CMC Photography, LLC

**SECOND:** The Florida Document number of the limited liability company is: L18000044838

**THIRD:** The street address of the limited liability company's principal office is:

8323 Klondyke Rd,

Youngstown, FL 32466

The mailing address of the limited liability company's principal office is:

8323 Klondyke Rd,

Youngstown, FL 32466


**FOURTH:** The date the statement of authority became effective is: 02/14/2018

**FIFTH:** The statement of authority is cancelled.

**OR**

The amendment to the statement of authority is  
to change the name from CMC Photograpy, LLC to

CMC Photography, LLC.

  
Signature of authorized representative

Cierra Camper

Typed or printed name of signature

**Filing Fee: \$25.00**  
**Certified Copy: \$30.00 (optional)**

CR2E145 (2/14)

**FILED**  
**APR 16 AM 10:41**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA