

L20 0000083341

(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



700344870447

05/21/20--01013--011 **25.00

2020 MAY 21 PM 4:18

FILED

Amend

JUN 12 2020

ALBRITTON



KENNETH R. FOUNTAIN

KERRY ANNE SCHULTZ

SCOTT C. BRIDGFORD

Tuesday, May 19, 2020

VIA REGULAR MAIL

Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: CAMLAN HOLDINGS, LLC

Dear Sir or Madam:

Enclosed please find the original and one copy of the Articles of Amendment for the above-referenced entity. Also enclosed is a check in the amount of \$25.00 for filing fee.

Should you have any questions, please advise. Thank you for your assistance in this matter.

Sincerely,

Kerry Anne Schultz, Esq.

KAS/amf

2045 FOUNTAIN PROFESSIONAL CT., STE. A | NAVARRE, FLORIDA 32566
(850) 939-3535 | (850) 939-3539 fax

SANTA ROSA BEACH
(850) 622-2700 | (850) 622-2722 fax

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

FILED
2020 MAY 21 PM 4:18

Camlan Holdings, 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 3/16/2020 and assigned
Florida document number L20000083341

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:

New Registered Office Address:

Enter Florida street address

_____, **Florida**
City 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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

