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Craig Campbell

863-991-1600

2808 Sunrise Drive
Sebring FL 33872

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: CAMPBELL HOSPITALITY 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:

CRAIG CAMPBELL

Name of Person

Firm/Company

Address

2808 SUNRISE DRIVE SEBRING FL 33872

City/State and Zip Code

SOUP6406@YAHOO.COM

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

For further information concerning this matter, please call:

CRAIG CAMPBELL

863 991-1600
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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroc 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

[illegible]

This image shows a single sheet of white paper with horizontal blue or grey ruling lines, typical of notebook paper. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

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.

Dated JUNE 18TH 2024

Signature of a member or author

Signature of a member or authorized representative of a member

CRAIG CAMPBELL

Typed or printed name of signee

Filing Fee: \$25.00