

P170000 21308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

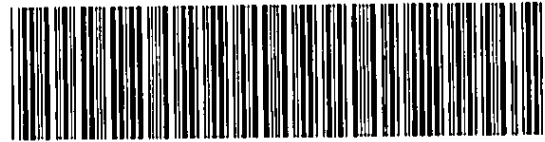
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

2018 DEC 21 P 4:48

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DEC 28 2018
T. LEMIEUX

Handwritten signature

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Campola Consulting and Intermediary Services Inc.
Name of Corporation

P17000021308
DOCUMENT NUMBER:

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Patsy Campola

Name of Contact Person

Campola Consulting and Intermediary Services

Firm/Company

9607 Cinnamon Ct

Address

Parkland Fl. 33076

City/State and Zip Code

campola@aol.com

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

For further information concerning this matter, please call:

Patsy Campola

954-815-3

Name of Contact Person

at ()

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 5, 2018

PATSY CAMPOLA
9607 CINNAMON CT
PARKLAND, FL 33076

SUBJECT: CAMPOLA CONSULTING AND INTERMEDIARY SERVICES INC.
Ref. Number: P17000021308

We have received your document for CAMPOLA CONSULTING AND INTERMEDIARY SERVICES INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you sent in is for a LLC you have a corporation.

Please return 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) 245-6050.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 918A00024956

12-17-2018

Attached are the corrected forms.

Thank you
Patsy Campola

RECEIVED

118 DEC 21 PM 12:02

SECRET
TALLA

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Campola Consulting and Administration Services Inc.
2. The principal office address: 9607 Cinnamon Ct Parkland Fl 33076

3. The mailing address (if different): 9607 Cinnamon Ct Parkland Fl. 33076

4. Date of incorporation/qualification: March 9, 2017 Document number: P17000021308

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Corporate Creations International Inc.

11380 Prosperity Farms Rd #221E

Palm Beach Gardens Fl 33410

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Patsy Campola

9607 Cinnamon Ct

Parkland Fl 33076

P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

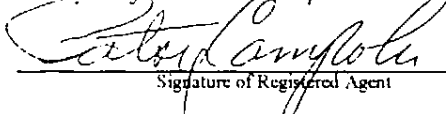


Signature of an officer or director

PATSY CAMPOLA - PRESIDENT

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

Dec. 17, 2018

Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR215045 (03/12)