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| Certified Copies Certificates of Status | | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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COVER LETTER

TO:

Amendment Section

| SUBJECT: Camo-Queen CorpName of Corporation | |
|---|---|
| Nume of Conformation | |
| DOCUMENT NUMBER: P20000070199 | |
| The enclosed Statement of Change of Registered Off | ice/Agent and fee are submitted for filing. |
| Please return all correspondence concerning this mat | ter to the following: |
| | |
| Pam Adams | |
| Name of Contact Person | |
| Camp-Queen Corp | |
| Firm/Company | |
| 4201 NW 199th Street | |
| Address | |
| Starke, FL 32091 | |
| City/State and Zip Code | |
| jessetreeman.inc@ gmail.com | |
| E-mail address: (to be used for future annual rep | ort notification) |
| | |
| | |
| For further information concerning this matter, pleas | e call: |
| Pam Adams | at + 352226-5370 Area Code & Daytime Telephone |
| Name of Contact Person | Area Code & Daytime Telephone |

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
The Course of Table because

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13):

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: Camo-Queen Corp |
| 2. The principal office address: 4201 NW 199th Street, Starke FL 32091 |
| 3. The mailing address (if different): 4201 NW 199th Street, Starke Ft. 32091 |
| 4. Date of incorporation/qualification: Document number: P20000070199 |
| 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) |
| BLAINE, LATHELL N |
| 101 ALEXANDER RD |
| STARKE, FL 32091 |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Jesse Adams |
| 10700 S. US HWY 301 CO |
| P.O. Box. NOT acceptable |
| Hampton, FL 32044 |
| 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. |
| Pamela K. Donahue |
| Signature of an officer or director 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 the 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. |
| Jene 6, Ham 05/08/2022 |
| Agnature of Registered Agent Date |
| If signing on behalf of an entity: |
| Typed or Printed Name |

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