

V37898

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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AND
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13 OCT 15 AM 10:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
OCT 22 2013
EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Campground Membership Outlet, Inc.
Name of Corporation

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:

Chad Hoel

Name of Contact Person

Campground Membership Outlet, Inc.

Firm/Company

17740 US HWY. 27N

Address

Clermont, FL 34715

City/State and Zip Code

Chadhoel@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Chad Hoel

Name of Contact Person

at (**352**) **242-0401**
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

**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: Campground Membership Outlet, Inc.
2. The principal office address: 17740 US Hwy. 27 N, Clermont, FL 34715
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/18/1992 Document number: V37898
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)

Rita McGuire

17740 US Hwy. 27 N

Clermont, FL 34715

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

Chad Hoel

17740 US Hwy. 27 N

P.O. Box NOT acceptable

Clermont, FL 34715

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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.

Rita McGuire
Signature of an officer or director

Rita McGuire
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.

Chad Hoel
Signature of Registered Agent

10-9-13
Date

If signing on behalf of an entity:

Chad Hoel
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
CR2E045 (03/12)