

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000155424

**Entity Name:** CAMPBELL ECOMM.LLC

**Current Principal Place of Business:**

14211 ROOF STREET  
FORT MYERS, FL 33905

**Current Mailing Address:**

14211 ROOF STREET  
FORT MYERS, FL 33905 US

**FEI Number:** 83-1045131

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CAMPBELL, EDWARD L  
14211 ROOF STREET  
FORT MYERS, FL 33905 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title AP  
Name CAMPBELL, EDWARD L  
Address 14211 ROOF STREET  
City-State-Zip: FORT MYERS FL 33905

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** EDWARD CAMPBELL

AP

04/29/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date