

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000149157

**Entity Name:** TOTAL SUPPLIES, LLC

**Current Principal Place of Business:**

6985 NW 82 AVENUE  
MIAMI, FL 33166

**Current Mailing Address:**

6985 NW 82 AVENUE  
MIAMI, FL 33166 US

**FEI Number:** 46-1468516

**Certificate of Status Desired:** No

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

KAIROS MULTISERVICES, LLC  
11715 WEST ATLANTIC BLVD  
34  
CORAL SPRINGS, FL 33071 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	MGR	Title	MRGM
Name	COLLA, RICHARD E	Name	RENGIFO DE COLLA, MILAGROS E
Address	6985 NW 82 AVENUE	Address	6985 NW 82 AVENUE
City-State-Zip:	MIAMI FL 33166	City-State-Zip:	MIAMI FL 33166

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RICHARD COLLA

**MEMBER**

**01/31/2013**

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

\_\_\_\_\_  
Date