F18000005222

	(Requestor's Name)		
	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-UF	WAIT MAIL		
	(Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

Office Use Only



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CSC - WÎLMINGTON

251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: January 27, 2020

Order#: 149698-131

Re: TOTAL AMERICAN SERVICES, INC.

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX __ Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	nge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida Statutes organized under the laws of the State of DE registered agent, or both, in the State of Florida.	
1. The name of t	he corporation: TOTAL AMERICA	N SERVICES, INC.	
	· — — -	ST STE 1800, HOUSTON, TX 77002	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 11/15/2018	Document number: F18000005222	<u> </u>
	street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file with the esigned)	20
	C T CORPORATION SYSTEM		(-)
	1200 SOUTH PINE ISLAND RO	AD	. : 22 9
	PLANTATION, FL 33324		
6. The name and (if changed):	I street address of the new registere	ed agent (if changed) and /or registered office	FH: 50
	Corporation Service Company		
	1201 Hays Street		
		P.O. Box NOT acceptable	
	Tallahassee	FL 32301	
_		street address of the business office of its regis	
Such change wa authorized by th	is authorized by resolution duly a be board, or the corporation has be	dopted by its board of directors or by an officer een notified in writing of the change.	r so
	Xie & Comi	Jill Cilmi, Vice President	
I hereby accept I further agree to of my duties, an document is beil corporation has	to comply with the provisions of a	Printed or typed name and title ent and agree to act in this capacity. Ill statutes relative to the proper and complete p he obligation of mv position as registered agen e in the registered office address, I hereby conf hange.	performance t. Or, if this irm that the
	ca 2-Kubl	01/24/2020	
_	nature of Registeled Agent half of an entity:	Date	
Grace E. Kirby,	Asst. Vice President		
	yped or Printed Name		

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