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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Divis	ion of Cor	porations					
SUBJECT: _	OTAL AN	D COMPLETE TAX SOLU	TIONS, LLC (old)				
BODBECT		Name of Lin	mited Liability Company				
The enclosed A	Articles of A	Amendment and fee(s) are su	bmitted for filing.				
Please return a	ll correspor	ndence concerning this matter	r to the following:				
		DENISE EVETTE KING					
			Name of Person				
		TAX COMPANY					
			Firm/Company				
		2441 ELKCAM BLVD					
			Address				
		DELTONA, FLORIDA, 3	2738				
			City/State and Zip Code				
		nyk8@yahoo.com			6	2(
			to be used for future annua	report notification	7 3)22 c	£ Tr
For further info	rmation co	ncerning this matter, please c	all:		ر سر آ آ آ را		***
DENISE E KIN	IG		407 36	51-3383		2022 JAN 13 1	1 m
	Name of I	Person	Area Code	Daytime Telepl	hone Number	다. 구. 보.	;
Enclosed is a ch	eck for the	following amount:			,	면 -	-
□ \$25.00 Filir	ig Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is end		S60.00 Filing Certificate of Certified Cop (additional copy	Status &	
Regist Divisi	Address: ration Se on of Cor	ction porations	Divisio	ddress: ation Section n of Corporation			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

TOTAL AND COMPLETE TAX SOLUTIONS, LLC

ART		ORGANIZATION OF	
	C	Vr.	
TOTAL AND COMPLETE TAX			
(Name of the Limi	ited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)	20
			(%%, (4)
The Articles of Organization for this Limited L		were filed on 08/20/2006	and assigned.
Florida document number L06000084416	··		15 160
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name of	f the limited liab	ility company here:	
Let's Get Paid Tax Solutions & More, LLC			
The new name must be distinguishable and contain the v	vords "Limited Liabi	lity Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	2441 Elkcam Blvd	
(Principal office address MUST BE A STREET ADDRESS)		DELTONA, FLORIDA, 32738	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	BOX)		
D			
B. If amending the registered agent and/or ragent and/or the new registered office address	egistered office a	ddress on our records, enter the	e name of the new registered
	<u> </u>		
Name of New Registered Agent:	DENISE E KIN	G	
·	2441 Elkcam Bl	and	
New Registered Office Address:	- Tri Elikeani Bi	Enter Florida street address	
	DELTONA	Di	da 32738
		City , FIORIC	Zip Code
New Registered Agent's Signature, if changing F	Registered Agent:		
I hereby accept the appointment as registered provisions of all statutes relative to the properacept the obligations of my position as registed being filed to merely reflect a change in the recompany has been notified in writing of this decompany has been notified in writing the decompany has been notified in the decompany has been	er and complete p stered agent as p registered office o	performance of my duties, and l rovided for in Chapter 605, F.S.	an familiar with and
	II bang	ing Registered Agent, Signature of Ne	ew Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	DENISE E. KING	2441 Elkcam Blvd, Deltona, Florida 32738	= Add
			□Remove
			□Change
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			□Remove
			Change

11 ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(It an etti	ve date, if other than the date of filing: O1/14/2022 (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)
docum	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
e record	I specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated _	01/14/2022
	<u> </u>
	Signature of a member or authorized representative of a member
	DENISE E. King

Typed or printed name of signee