L120000036588

(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

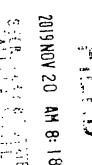
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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2019

KEITH TIRICO TOTAL BUSINESS BROKERAGE & CONSULTING GR 11017 GOLDEN EAGLE COURT PLANTATION, FL 33324

SUBJECT: TOTAL BUSINESS BROKERAGE & CONSULTING GROUP LLC

Ref. Number: L12000036588

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 919A00023119

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COVER LETTER

Registration Section

P.O. Box 6327

Tallahassee, FL 32314

TO:

Division of Corporations
SUBJECT: Total Business Brokerage + Consulting Group L.L.C. Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Keith Tirico
Total Business Brokerage + consulting Coroup LL
Firm/Company
11017 Golden Eagle CT Address
Plantation FL 33324
Plantation FL 33324 City/State and Zip Code Ke: +h @ Total biz group. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Keith Tirico at (954) 895 - 6098 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)
MAILING ADDRESS: Registration Section Division of Corporations STREET/COURIER ADDRESS: Registration Section Division of Corporations

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Total Business Brokerage + Consulting Group LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 3/	14/2012	and assig	gned
Florida document number <u>L1200036</u> 58	38 			~
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designa	tion "LLC" or the abbr	reviation "L.L	.C."
Enter new principal offices address, if applicable:			7.5	
(Principal office address MUST BE A STREET ADDRESS)	·		99	
			NON.	4 #
			20]
Enter new mailing address, if applicable:		_	3	1 3 B
(Mailing address MAY BE A POST OFFICE BOX)	 	<u>-</u>	. 00	
	· · · · · · · · · · · · · · · · · · ·		- <u></u>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		records, enter the	he name o	f the new
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida str	eet address		
		, Florida		
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New 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>	Address	Type of Action
MGR	Tim Shealy	Davie FL 33328	⊠ Add
	7	Davie FL 33328	□ Remove
			Change
			□ Remove
			☐ Change
			🗆 Add
			□ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			🗅 Add
			Remove
			Change
			
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_	14/22/2010
. Effect	ve date, if other than the date of filing: 11/20/2019 (optional)
Note:	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 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.
) The	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	11/16/2019
	Signature of a member or authorized representative of a member
	Keith Tirico

Page 3 of 3

Filing Fee: \$25.00