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(Req	uestor's Name)	
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(City)	/State/Zip/Phone	⇒#)
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J. SAULSBERRY EXAMINER

JAN 31 2013

COVER LETTER

10: Registration Se Division of Cor	ction porations			
SUBJECT:	otal Gener	2 Service L	LC.	
50 5 0000	Name of Limit	ed Liability Company		
	·			
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	I+	elo Morgarti Name of Person		
		Name of Person		
	total 6	seneral Service 1	IC.	
	0010	ı	1	
	8249 N.	W 36st Steel	suite 112	20
		Address		
	Doral	FL, 33166	The state of the s	2
		City/State and Zip Code	新教	36
	totzlgenerz	FL, 33166 City/State and Zip Code Services @ 9m2il to be used for future annual report notification	·Com	2013 JAN 30 AM 9:441
	· ·	•	on)	
For further information co	oncerning this matter, please ca	all:	頭哨	8
AlFredo M	Morganti	at (954) 394 - 46	07	
Name o	f Person	Area Code & Daytime Te		
Enclosed is a check for th	ne following amount:			
□ \$25.00 Filing Fee	Ca\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60,00 Filing Fee, Certificate of Statu Certified Copy (additional copy is	

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

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

total General	Service L	LC.	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on ou iability Company)	r records.)	
The Articles of Organization for this Limited Liability Company Florida document number LIQOOII8055.	were filed on 9 L	2012 and assigned	l
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab Total General Ser			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," the	designation "LLC" or the abbrev	iation
Enter new principal offices address, if applicable:	Y/2		
(Principal office address MUST BE A STREET ADDRESS)		2 2 2 2 2 3 3 3 3 3 3 3 3 3 3	
Enter new mailing address, if applicable:	<u> </u>	JIS JAN 30	Tj
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>		רַיִּ
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her			new
Name of New Registered Agent:			
New Registered Office Address:	Enter Flor	rida street address	—
	City	_, Florida Zip Code	
Naw Degistered Agent's Signature if changing Degistered Agents			

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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Man	aging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	MA		Add
	·		Remove
			_
			Add
			Remove
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			2013 JAN 30
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		TARE MANSSIE FLERIOR	Remove
		音 思	- -
			_ Add
			Remove
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			_ Remove

). If am	tending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	. • .
\	2017
ted	anuary 26" , 2013.
	Altred o Hova and
	Signature of a-meinber or authorized representative of a member
	THUO A. MORGANT? Typed or printed name of signee
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

2013 JAN 30 AM 9: 40