[12000136166

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SECRETARY OF STATE

M. Callison AU6 - 7:2013

COVER LETTER

TO:	٠.	Registration Section .	
		Division of Corporation	n's

SUBJECT: Turbo Tay Performance LCC

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rosely DeAquino

Name of Person

Firm/Company

10835 Birchard lane

Address

Jacksonville FL 32257

City/State and Zip Code

admin@kelsam.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mateus Barroso

at (<u>904</u> 325-0

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

FILED 2013 AUG -6 PM 12: 36

SECRETARY OF STATE FALLAHASSEE, FLORIDA

TURBO TOY PERFORMANCE 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 10/25/2012	and assigned
Florida document number L12000136166		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
M & R Total services LLC		
The new name must be distinguishable and end with the words "Limit"L.L.C."	ited Liability Company," the designa	ation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	4451 Sunbeam Rd	
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville FL 32257	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	4.	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	eet address
	, Flor	
	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 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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add
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		****	_
			Add
			Remove

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	Signature of a member or authorized representative of a member

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Filing Fee: \$25.00

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