h13000042115

	and Name	
(KE	equestor's Name)	
(Ad	idress)	
(Ac	ldress)	
(Cii	ty/State/Zip/Phone #)	<u></u>
	,, , , , , , , , , , , , , , , , , , ,	•
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Name)	
(Dr	ocument Number)	
(50	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	_
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COVER LETTER

J:

Tallahassee, FL 32314

9: Registration Section Division of Corporations			
J BJECT :	Total Tury Name of Limited	Liability Company	ources, LLC
ne enclosed Artic	cles of Amendment and fee(s) are submit	ted for filing.	
ease return all co	orrespondence concerning this matter to t	he following:	
	Ucu +	Name of Person	
	Tota	Firm/Company	y Resources, LLC
	10326 NW U	eznd Driv	<u>e</u>
	Parklang	d Fl. 330	16
	totaltu)Y N	tt.net
or further inform	nation concerning this matter, please call:		
Jor	Name of Person	at (954) 67 L	3877 ne Telephone Number
1	Name of Felson	, 5535	
nclosed is a chec	ck for the following amount:		
\$25.00 Filing	Fee \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Address:	Street Address: Registration So	ection
Registration Section Division of Corporations		Division of Co	rporations
P.O. Box 6327		The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: Total Turnful Resources LC
2	(a)	(b)
4.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)
		10326 NW 6279 Drive
		Parkland, F1. 33076
		9/28/2020 13000042115
3.		Date of filing/registration in Florida 4. Document number
ร	(a)	Joy Kelley
٠.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
		10326 He 62nd Drive
	_	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
	·	Parkland, Fl. 33076
		C 1 28 T 28 T
	(b)	SANTON DENISE BECKER - LANTIULES
		4980 Baraldi Circle
		NEW Registered Office Address:
		4207
		Sarasota FL 34235
If :	ha li	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the
cha	ange	or changes are made, the Florida street address of the registered office and the business office of the registered
age	ent v	vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative yote of the members of the limited liability company or as otherwise provided in
the	arti	cles of organization or the operating agreement of the limited liability company.
		Joy Kelley Voy Kelley
	-	ure of a member or authorized representative of a member Printed or typed name of signee
pre the to	ovisi • obl mere	In accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the wins of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.
Si	gnatin	re of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00