

L17000057594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200297487442

04/05/17--01022--015 **60.00

17 APR 20 PM 12:57
TAMPA, FLORIDA

APR 20 2017

Y SULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Total-Home Maintenance, LLC
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:

Tommy Currington Jr
Name of Person
Total-Home Maintenance, LLC
Firm/Company
2001 N.E. Avenue I
Address
Belle Glade, FL 33430
City/State and Zip Code
totalhomecare2017@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Tommy Currington Jr at 561 257-8730
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2017

TOMMY CURRINGTON JR
2001 NE AVENUE I
BELLE GLADE, FL 33430

SUBJECT: TOTAL-HOME MAINTENANCE, LLC
Ref. Number: L17000057594

Received
4/13/2017
(signature)

We have received your document for TOTAL-HOME MAINTENANCE, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 917A00006682

RECEIVED
2017 APR 20 AM 11:59
CLERK OF THE STATE
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

Total-Home Maintenance, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

4/13/2017
Spelled
Incorrectly

The Articles of Organization for this Limited Liability Company were filed on March 13, 2017 and assigned
Florida document number L17 0000 57 594.

This amendment is submitted to amend the following:

requesting the words
be spelled correctly

A. If amending name, enter the new name of the limited liability company here:

Total-Home Maintenance, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

SAME - NO changes

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

SAME - NO changes

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new
registered agent and/or the new registered office address here:

Name of New Registered Agent:

SAME

New Registered Office Address:

SAME

Enter Florida street address

SAME

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.

N/A

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>	<u>Address</u>	<u>Type of Action</u>
NO	CHANGES	SAME	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

17 APR 2004
FLORIDA
SECRETARY OF STATE

✓

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

No changes

17 APR 20 PM 07
ALABAMA
SECRET, LONDA

E. Effective date, if other than the date of filing: Same (optional)

(If an effective 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated March 22, 2017.

Angelette Green
Signature of member or authorized representative of a member

Angelette Green
Typed or printed name of signer