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18 FEB 22 PM 7:07

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TOTAL EFFECTIVENESS SOFTWARES 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:

Jean-Marc Widmer

Name of Person

Total Effectiveness Softwares LLC

Firm/Company

1500 Weston Rd, Suite 200-28

Address

Weston, FL 33326

City/State and Zip Code

cfo@totaleffectiveness.net

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

For further information concerning this matter, please call:

Jean Deglon

954

770 5348

at ()

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

TOTAL EFFECTIVENESS SOFTWARES LLC

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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>
MGR	JEAN-FRANCOIS DEGLON	14980 Windbluff St	<input type="checkbox"/> Add
		Davie, FL 33331	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JEAN-MARC WIDMER	8785 Thousand Pines Cir	<input type="checkbox"/> Add
		West Palm Beach, FL 33411	<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

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

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F. Effective date, if other than the date of filing: _____ (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 505.0207 (3)(b)

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

(b) The 90th day after the record is filed.

Dated February 2 2018

D. Dyke

Jean-François Deglon

Albin

Jean-Marc Widmer

Typed or printed name of signer