118000083973

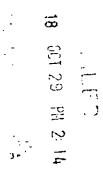
(Re	questor's Name)	
(Ad	dress)	
DA)	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



700320080167

10/29/18-+01007-+012 **25.00



COVER LETTER

Divi	ision of Cor	porations			
SUBJECT:	Total Real	ty Solutions LLC			
70 DØ LC 1 1	Name of Limited 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:		
		Sharolyn M Walker			
		Total Realty Solutions LLC	Name of Person		
	,	4177 Arbor Mill Circle	Firm/Company		
		Orange Park, FL, 32065	Address		
		totalrealtysolutionsllc@outlo	City/State and Zip Code		
		-	to be used for future annual report notif	ication)	
For further in	iformation c	oncerning this matter, please ca	all:		
Sharolyn W	alker/		904 228-5322 at ()		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed is a	check for th	ne following amount:			
■ \$25.00 F	iling Fec	☐ \$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:

TO:

Registration Section

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 Realty Solutions LLC				
(Name of the Limited (A	Liability Compa Florida Limited	iny as it now appears on our re Liability Company)	ecords.)	
The Articles of Organization for this Limited Liab Florida document number 418000083973	ility Company	were filed on April 05, 201	18 and a	issigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the	<u>ie limited liab</u>	ility company here:		
The new name must be distinguishable and contain the word	ls "Limited Liabi	lity Company," the designation		11C."
Enter new principal offices address, if applicab	new principal offices address, if applicable: cipal office address MUST BE A STREET ADDRESS) 4177 Arbor Mill Circle Orange Park, FL. 32065			
		Orange Park, FL. 32065	<u> </u>	,
			至	, ,
Enter new mailing address, if applicable:		4177 Arbor Mill Circle	5	
(Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	Orange Park, FL. 32065	,	-
B. If amending the registered agent and/or registered agent and/or the new registered office Name of New Registered Agent:	.,		ords, enter the nam	e of the no
Name Damintarial (Affice Address)	4177 Arbor M	ill Circle		
New Registered Office Address:		Enter Florida street aa	ddress	
	Orange Park		. Florida ³²⁰⁶⁵	
		City	Zip Coa	/ _{('}

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.

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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Sharolyn M Mckennon		
			
			☐ Remove
		Sharolyn M Walker/ 4177 Arbor Mill Circle Orange Park, FL 32065	
	1 T 14/-P		
MGR	Laurence T Walker		🗀 Add
		4177 Arbor Mill Circle Orange Park, FL. 32065	
			🖺 Change
			5 .11
			Add
			Remove
			3
			<u>d⊟</u> Change
			2 ر
			四 Add -
			
			Change
			□ Add
			□ Remove
			5 C
			Change
			□ Remove
			□ Change

						
						
				_ ,		
			·			
						
					<u>. </u>	-1 -
-			 -			<u></u>
						<u> </u>
						Ċ
					-	=
					<u> </u>	
ective date, if other than the reflective date is listed, the date made. If the date inserted in this nument's effective date on the	block does not meet t	he applicable sta	of filing or more th tutory filing req	(optior an 90 days after fi uirements, this c	ial) ling.) Pursuai late will not	nt to 605.0 t be listed
		but not an e	ffective time	at 12:01 a.	m. on the	earlier
record specifies a delayer the 90th day after the related Who because the related with the	Supalure of a month	<u> 2018</u> .	L L	Q Q (Q	<u>JL</u>	

Page 3 of 3

Filing Fee: \$25.00