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(Red	questor's Name)	
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## **COVER LETTER**

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TO: Registration Section Division of Corporations
SUBJECT: Total Apartment Services 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:
Camille Morals Name of Person
Total Apartment Services LLC Firm/Company
10857 Japonica Ct.
Boca Raton, FL 33498  City/State and Zip Code  Camille & total apartment Services. Net  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Camille Moras at (469) 258 086 Daytime Telephone Number
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee Certificate of Status  □ \$30.00 Filing Fee & Certified Copy (additional copy is enclosed)  □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

			-	- co
Total Apartm	ent Servi	(t) LLC	ur records.)	
(A)	Florida Limited L	iy as it now appears on o iability Company)	ur records.	1
The Articles of Organization for this Limited Liab Florida document number <u>L180001534</u>	oility Company	were filed on	22/2018	and assigned
This amendment is submitted to amend the follow				24
A. If amending name, enter the new name of the	he limited liabi	lity company here:		
The new name must be distinguishable and contain the word	ds "Limited Liabil	ty Company," the designa	nion "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicah	ole:	10857 Japa Boca Rati		
(Principal office address MUST BE A STREET	<u>ADDRESS)</u>	150ca 12010	)N PL 33	<u> 148</u>
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE B)	<u>0X)</u>	10857 Ja Boca Rat	ponica C on FL 3	+ 3498
B. If amending the registered agent and/or registered agent and/or the new registered office	r registered of	fice address on our	records, enter	the name of the new
Name of New Registered Agent:	Camille	Morais		
New Registered Office Address:	10851	Japonica Ct Enter Florida st	reet address	
	Boca	Raton	, Florida	33498
	<del></del>	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.

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>	Name	Address	Type of Action
MGR	Michael Cisero	16900 NW 19thst	
		Pembrooke Pines FL 33028	Remove
			Change
MUR	Roze Morais	10857 Japonica ct	Add
		Bola Raton, FL 33490	Remove
			Change
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Note:	five date, if other than the date of filing: JUN 30 <sup>th</sup> 2018  fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90. If the date inserted in this block does not meet the applicable statutory filing requirement's effective date on the Department of State's records.	<b>(optional)</b> days after filing.) Pursuant to 605.0207 (, ents, this date will not be listed as th
	cord specifies a delayed effective date, but not an effective time, at 3 good of the secord is filed.	12:01 a.m. on the earlier of:
Dated	July 30 <sup>th</sup> . 2018	
	Signature of a member or authorized expresentative of a member	- P .
		ن ن
	Camille Morau	211