## 118000189782

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## **COVER LETTER**

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	Registration Secti Division of Corpo					
SUBJEC	T: Tota	1 5/001	and more	ر در		
			nited Liability Company			
The encle	osed Articles of An	nendment and fee(s) are sub	omitted for filing.			
Please re	turn all corresponde	ence concerning this matter	to the following:			
		James 1	JUNGES HET Name of Person		<del></del>	
		Total K	Firm/Company	d bath		2023 A 52 11 PH 12: 4:3
		1509 bu	bara ave			11 PH 12
			Address		1979 1979	PHI
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	-	totation co E-mail address:				
For furth	er information conc	erning this matter, please c	all:			
Jam	es Nunge Name of Pe	5K	at (727)	488 Designation To		_
			Area Code	Daytime Te	elephone Number	
Enclosed	is a check for the f	ollowing amount:				
፟ \$25.0	00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing For Certified Copy (additional copy is		S60.00 Filing I Certificate of Certified Copy (additional copy i	Status & y
	Mailing Address: Registration Sec Division of Corp P.O. Box 6327 Tallahassee, FL	oorations	Regi Divis The 0 2415	Address: stration Sectionsion of Corpor Centre of Talla N. Monroe S hassee, FL 32	rations ahassee treet, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Compa (A Florida Limited 1.	MUTC CCC ny as it now addears on our re	cords.)
The Articles of Organization for this Limited Liability Company	were filed on $08/0$	18/2018 and assigned
Florida document number <u>L18000189782</u> .		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Total Kitchen and bath	LLC	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "	'LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		20
Principal office address MUST BE A STREET ADDRESS)		1
		70
	**************************************	
	ALLA	
Inter new mailing address, if applicable:	10111	
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>er</u>	iter the name of the new registers
Name of New Registered Agent:	N/A	
New Registered Office Address:	Enter Florida street ad	ddress
		·
	City	, Florida
	C.i.y	en come

## 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 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>	Address	Type of Action
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