# 118000259124

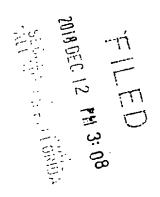
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### **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:	TOTAL PRO	O SOLUTIONS LLC		
			ed Liability Company	
The enclosed	I Articles of A	amendment and fee(s) are subn	nitted for filing.	
		dence concerning this matter to	-	
r icase return	ran correspon	dence concerning this matter of	o the following.	
		ANGELINA L. SANTOS		
			Name of Person	
		TOTAL PRO SOLUTIONS	SILLC	
			Firm/Company	<del></del>
		PO BOX 422308		
			Address	
		KISSIMMEE, FL 34742		
		TOTALPROSOLUTIONSL	City/State and Zip Code LC@GMAIL.COM	
		E-mail address: (to	be used for future annual report notifica	tion)
For further in	nformation co	ncerning this matter, please cal	11:	
ANGELINA	A L. SANTOS		at () 442-2244 Area Code Daytime T	
	Name of	Person	Area Code Daytime T	elephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 H	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:

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

2018 DEC 12 FM 3:08

TOTAL PRO SOLUTIONS LLC

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

he Articles of Organization for this Limited L lorida document number L18000259124	iability Company	were filed on 11/05	/2018 and assigned	
nis amendment is submitted to amend the foll	owing:			
. If amending name, enter the new name of	f the limited liab	ility company here	:	
OTAL PRO SOLUTIONS ELC				
e new name must be distinguishable and contain the	vords "Limited Liabil	lity Company." the desig	gnation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		5394 DAHLIA RESERVE DRIVE		
Principal office address MUST BE A STREE		KISSIMMEE, FL 34758		
nter new mailing address, if applicable:		PO BOX 422308		
Mailing address MAY BE A POST OFFICE BOX)		KISSIMMEE, FL.	34742	
		<u> </u>		
. If amending the registered agent and eqistered agent and/or the new registered of			ur records, enter the name of the	
	tho deal cooler	<b>~</b> •		
Name of New Registered Agent:	ANGELINA L	. SANTOS		
New Registered Office Address:	5394 DAHLIA RESERVE DRIVE			
		Enter Florida	street address	
	MICCIAME		1.1759	
	KISSIMMEE		, Florida <sup>34758</sup>	

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

Page 1 of 3

# 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>	Address	Type of Action
MGR	ANGELINA L. SANTOS	PO BOX 422308 KISSIMMEE, FL 34742	■ Add
			□ Remove
			Change
			☐ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			Add
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1-4- 15 -Al	Al Al	<b>4 4</b> :0:				/ 4! 1\	
e date is listed, t e date inserted	he date must be I in this block	specific and c does not me	annot be prior et the applic	to date of filing able statutory	or more than 90 filing requirem	days after filing.) P	ursuant to 605.0207 Il not be listed as
specifies a th day after	delayed el	fective da is filed.	te, but no	t an effecti	ve time, at :	l2:01 a.m. or	the earlier o
12	110/1	8		<del>)</del>			
			1	ee			
•	edate is listed, the date inserted effective date specifies a	e date is listed, the date must be e date inserted in this block effective date on the Depar specifies a delayed ef h day after the record	e date is listed, the date must be specific and de date inserted in this block does not me effective date on the Department of States specifies a delayed effective dath day after the record is filed.	e date is listed, the date must be specific and cannot be prior e date inserted in this block does not meet the applic effective date on the Department of State's records.  specifies a delayed effective date, but no h day after the record is filed.	e date inserted in this block does not meet the applicable statutory effective date on the Department of State's records.  specifies a delayed effective date, but not an effective day after the record is filed.	e date is listed, the date must be specific and cannot be prior to date of filing or more than 90 e date inserted in this block does not meet the applicable statutory filing requirem effective date on the Department of State's records.  specifies a delayed effective date, but not an effective time, at 1 h day after the record is filed.	edate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pure date inserted in this block does not meet the applicable statutory filing requirements, this date will effective date on the Department of State's records.  specifies a delayed effective date, but not an effective time, at 12:01 a.m. on

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00