## L18000284053

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of Cor	porations			
	ising Group, LLC			
SUBJECT:	Name of Lim	ted 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:		
,	, and the second			
	Heather Lawson-Bradfield			
		Name of Person		
	Totum Advising Group, L	LC		
		Firm/Company		
	8710 Elm Leaf Ct			
		Address	<del>-</del>	
	Port Richey, FL 34668			
		City/State and Zip Code		
	heather@cloverservices.co			
		to be used for future annual report not	(incation)	
For further information c	oncerning this matter, please c	all:		
Heather Lawson-Bradfield		813 538-0686 Area Code Daytir		
Name o	f Person	Area Code Daytir	ne Telephone Number	
Enclosed is a check for ti	ne following amount:			
■ \$25,00 Fiting 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:		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303



June 4, 2021

HEATHER LAWSON-BRADFIELD 600 CLEVELAND ST STE. 391 CLEARWATER, FL 33755

SUBJECT: TOTUM ADVISING GROUP LLC

Ref. Number: L18000284053

We have received your document for TOTUM ADVISING GROUP LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Profit Corporation, but your entity is a Limited Liability Company. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 821A00012225

Irene Albritton Regulatory Specialist II

www.sunbiz.org

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

AMENDMENT TO ORGANIZATION OF  Any as it now appears on our records.) Liability Company)  were filed on 12/11/2018  and assigned
Any as it now appears on our records.)
any as it now appears on our records.)
Any as it now appears on our records.) Liability (company)
Liability Company)
Company Company
were filed on 12/11/2018 and assigned
-
pility company here:
ility Company," the designation "L.L.C." or the abbreviation "L.L.C."
600 Cleveland St.
Suite 391
Clearwater, FL 33755
<del></del>
600 Cleveland St.
Suite 391
Clearwater, FL 33755
address on our records, enter the name of the new registered
Enter Florida street address
, Florida
City Zip Code
ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is address, I hereby confirm that the limited liability

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 = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Add
			□Remove
			☐ Change
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			□Remove
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\_\_\_\_\_ □Remove

\_\_\_\_\_ Change

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Note: I	e date, if other than the date of filing:
ne record ord is file	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	June 30th . 2021. Ham-Ber
	Signature of a member or authorized representative of a member
	Heather Lawson-Bradfield
	Typed or printed name of signee

Filing Fee: \$25.00