N21000250778

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T. MATTHEWS

DEC 10 2021

COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corp	porations		
SIRIECT: Total	Detail Pros		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Jennifer	Gonzalez Name of Person	
	_ Total Deta	FirmeCompany	
	1420 NE 33	Address	
	Homestead F	lorida 33033 City/State and Zip Code	
	total detail F	0059 gmail.com	fication)
For further information ed	oncerning this matter, please ca	all:	
Jenniser Go	<u>QZQ\čZ</u> Person	at (<u>78 %</u>) <u>656 ·</u> Area Code Daytim	9792 e Telephone Number
Enclosed is a check for th	e following amount:		
\$ \$25.00 Filing Fee This one	\$\$\$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 Registration S Division of Co P.O. Box 632	section orporations	Street Address: Registration Sec Division of Cor The Centre of T	porations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION . . . OF

Total Detail Pros	21 HOL 20 PM 3: 16
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L21000350778</u> .	were filed on $\frac{06/28/3031}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1420 NE 3310 AVC #201
(Principal office address MUST BE A STREET ADDRESS)	Homestead Fl 33033
Enter new mailing address, if applicable:	1420 NE 33rd Avc # 201
(Mailing address MAY BE A POST OFFICE BOX)	Homestead Fl 33033
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	Cuy 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 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 $AMBR = A$	lanager authorized Member		
<u>Title</u>	<u>Name</u>	Address 21 800 20 Pil 3: 16	Type of Action
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