

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000188679

**Entity Name:** IKON HOME SOLUTIONS LLC

**Current Principal Place of Business:**

1420 CELEBRATION BLVD  
STE 200  
CELEBRATION, FL 34747

**Current Mailing Address:**

1420 CELEBRATION BLVD  
STE 200  
CELEBRATION, FL 34747 US

**FEI Number:** 85-2007896

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MARIN, SANDRA  
1210 AMBASSADOR DR  
APT 327  
CELEBRATION, FL 34747 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** SANDRA MARIN

01/31/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name RODRIGUEZ, FRANCISCO  
Address 1322 OAK CREST ST  
City-State-Zip: DAVENPORT FL 33837

Title AUTHORIZED MEMBER  
Name AYALA, CHRISTIAN DAVID  
Address 855 S BROADWAY AVE.  
APT 2  
City-State-Zip: BARTOW FL 33830

Title MANAGER, AUTHORIZED MEMBER  
Name SANDRA TERESA, MARIN CASTRO  
Address 1210 AMBASSADOR DR  
APT 327  
City-State-Zip: CELEBRATION FL 34747

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SANDRA TERESA MARIN CASTRO

MANAGER

01/31/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date