L21000301927

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

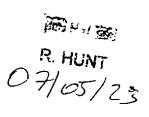
Office Use Only



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COVER LETTER

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elib li		Urban Air Suncoast. LLC		`		
SUBJI	sc1:					
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		Kaleib I. Henry S.R				
			Name of Person		_	
			Firm/Company			
10600 4th Street North Apt 720					; <u>-</u>	
			Address			
		St. Petersburg, FL 33716			2 mg	ĝ
		Kaleibh@gmail.com	City/State and Zip Code	í	PH 6:5	Ţ
			to be used for future annual report not	ification)	E 7	
For fur	ther information c	oncerning this matter, please c	all:			
Kaleib	I. Henry S.R.		727 383-7510 at ()			
	Name of	f Person	Area Code Daytin	ne Telephone Numbe	' r	
Enclos	ed is a check for th	ne following amount:				
■ \$2	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ate of Status &	
	Mailing Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Tallahassee oe Street, Suite 8	310	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Urban Air Suncoast, LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{06/30/2021}{1}$ and assigned Florida document number L21000301927 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Henry's Home Solutions, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C," Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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
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Effective date, if other than the date of filing: (Optional) (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 Note: If the date inserted in his block does not need the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record 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 ord is filed. Dated One of the policy o					
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Talain W. May	Dated 6/26 2023				
Signature of a member or authorized representative of a member	Valain W. Nou				
	Signature of a member or authori	of representative of a member			

Typed or printed name of signee