L22000534812

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COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations				
eun mert.	Ready One Solution, LLC					
SUBJECT:		Name of Lim	tited Liability Company	·		
The analogo	I Articles of	Amendment and fee(s) are sub	enittad fise filina		-	
Please return	all correspo	ndence concerning this matter	to the following:			
		Tara McCall				
			Name of Person			_
		Ready One Solution, LLC				
		•	Firm/Company			_
		4233 W. Atlantic Blvd. Su	ite #971039			
			Address			_
		Coconut Creek, FL 33097				
			City/State and Zip C	ode		-
		tmccall26@ yahoo.com				
		E-mail address: (to be used for future an	nual report not	ilication)	
For further it	nformation c	oncerning this matter, please ca	all:			
Tara McCall			954 at (793-8268		
	Name o	r Person	at (at Code	Daytin	ie Telephone Numb	er
		ne following amount:				
□ \$25.00 H	Filing Fee		☐ \$55,00 Filing I Certified Cop, tadditional copy	y	Certifie	ate of Status &
Mailing Address: Registration Section				<u>x Address:</u> istration Se	etion	
	_	orporations		Registration Section Division of Corporations		
). Box 632	•			Fallahassee	
	lahassee, l				e Street, Suite	810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 December 22, 2022	and assig	gned
Florida document number 1.22000534812			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
keadylone solutions, 1.1.1. (100) Ready Or	ne Solutions, L	<u>i</u> C	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the	abbreviation "L.L.	.C.:"
Enter new principal offices address, if applicable:	(same)		
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	(same)		
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 na</u>	ame of the new	registered
Name of New Registered Agent:			
New Registered Office Address:			; ; · · · ·
	Enter Florida street address	-	
	, Florida ,	Zip Code	
	City	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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	(same)		□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Remove
			□Change
			\ \ \ \ \ \
			□Remove

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Only changing name from Ready One Solution, LLC to Ready One Solutions, LLC.
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E ffoot	ive date, if other than the date of filing: July 27, 2023 (optional)
Note:	ective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ent's effective date on the Department of State's records.
he recor ord is fi	d 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 led.
Dated	Signature of a member authorized representance of a member
	Typed or printed name of signee

Filing Fee: \$25.00