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COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: Home Solu		ited Liability Company	 _
	. and or Ellis	area Elability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sath Washington		
		Name of Person	
	Home Solutions LLC		
		Firm/Company	
	158 Alcazar St.		
		Address	
	Royal Palm Beach, FL 33		
	sathbw@gmail.com	City/State and Zip Code	
	~ -	to be used for future annual report notif	ication)
For further information e	oncerning this matter, please c	all:	
Sath Washington		at (561) 292-8554 Daytime	
Name o	f Person	Area Code Daytime	: Telephone Number
Enclosed is a check for the	ne following amount:		
□ \$25.00 Filing 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:	tion
Registration S Division of C	orporations	Registration Sec Division of Corp	
P.O. Box 632	27	The Centre of T	allahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Home Solutions Realty LLC		
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our records. Limited Liability Company)	· · · · · · · · · · · · · · · · · · ·
The Articles of Organization for this Limited Liability Co	ompany were filed on 1-30-2023	and assigned
Florida document number 1.23000055042		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
Home Solutions LLC Home Solve	tion Group, La	10
The new name must be distinguishable and contain the words "Limit	ed Liability Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	- 	
(Principal office address MUST BE A STREET ADDRI	<u>ESS)</u>	
		- ,
		<i>:</i>
Enter new mailing address, if applicable:		· :
(Mailing address MAY BE A POST OFFICE BOX)	 	•
		;
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter th	ie name of the new register
agent and/or the new registered office address here.		
Name of New Registered Agent:		
Natur Danietored Office Adduces		
New Registered Office Address:	Enter Florida street address	
	. Flor	ida
	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 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 = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
			□Add
			□Remove
			□ Change
	 		□ Add
			□Remove
			□Change
			□Add
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			□Change
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			🗆 Add
			□Remove
			□Change
			□Remove

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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.) Pursua Nute: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	
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ne record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the The 90th day after the record is filed.	e earlier o
Dated March 1st . 2024	
Signature of a member of authorized representative of a member	

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