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300430721463

Kalon Rental's

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kaisha Gonzalez

Name of Person

Kalon Rental's Luc

Firm/Company

Address

City/State and Zap Code

Kaisha. Kiaralis@9m2il.com

E-mail address:(to be used for future annualfeport notification)

For further information concerning this matter, please call:

laisha Gonzalez atl

Name of Person

Area Code Daytime Telephone Number

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Registration Section

Registration Section

Division of Corporations

Division of Corporations

P.O. Box 6327

The Centre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT

TO

ARTICLES OF ORGANIZATION

OF

Kalon Rental's LLC

(Name of the Limited Liability Company as it now appears on our records,)

The Articles of Organization for this Limited Liability Company were filed on

May 22,2024

Florida document number L 2300014671

This amendment is submitted to amend the following:

A, If amending name, enter the new name of the limited liability company here:

Ambitious Home Solutions LLC

Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: 7901 4th St. N STE 400 MAY BE A POST OFFICE BOX) St. Petersburg			
B. If amending the registered agent and/or registered office address on our records, enter the registered agent and/or the new registered office address here:	name of	the ne	<u>ew</u>
Name of New Registered Agent:	Ch	ange	
New Registered Office Address:			
Enter Florida street address			
FloridaCity Zip Code	?		
New Registered Agent's Signature, if changing Registered Agent:	Cŀ	nange	
I herebyaccept the appointment as registered agent and agree to act in this capacity. I further agree to provisions of all statutes relative to the proper and complete performance of my duties, and I am familiate the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume merely reflect a change in the registered office address, I hereby confirm that the limited liability constilled in writing of this change.	ar with ai ent is bein	nd acce ng filed	ept Lto
If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person bei	ngadded	or remo	ved
MGR= Manager	, , , , , , , , , , , , , , , , , , , ,	2021 HB	
AMBR=Authorized Member	. 3	# . -	T
	. r	22 AM 11:39	

Address Type of Acti Title Name □Adđ Remove Change ⊏Add Remove □Add Remove □Add CRemove Change □Add Remove Change Remove
: 39 D. If amending any other information, enter change(s) here: (Attach additional sheets, If necessary.)

. . .

and cannot beprior to date of filing or more than 90 days aft	_(optional)(If an effective date is listed, the date must be specific er filing.) Pursuant to 605.0207(3)(b)Note: If the date inserted in irements, this date will not be listed as the document's effective
If the record specifies a delayed effective date, but not an effecti the record is filed.	ve time, at 12:01 a.m. on the earlier of: (b) The 90th day after
Dated May 22	2024 Signature of
a member or authorized representative of a member	
Kaisha K. Go	omalez

Typed or printed name of signee

2024 MAY 22 AM 11: 39

Filing Fee: \$25.00