## L23000405470

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
MAY -5 2025

Office Use Only



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SECRETARY OF STATE

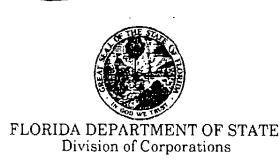
Rec. corr. 7/14/25 through email

## **COVER LETTER**

	Registration Sec Division of Corp			•
SUBJEC	Krentals LL	С	. ·	•
3020		Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	_	
		Babis Karamolengos		
			Name of Person	
		Krentals LLC		
			Firm/Company	
		531 Sw Choctaw Ave		
		Ft. White, FI 32038		
			City/State and Zip Code	<del></del>
		bkaramolengos@gmail.com		51 282
For furthe	er information co	t:-mail address: ( oncerning this matter, please ca	to be used for future annual report notificationall:	TALL
Babis Ka	ramolengos		at 850, 661-76	39 额 三
	Name of	Person	Area Code Daytime Tele	SECULLARIAN SE FATT
Enclosed	is a check for th	e following amount:		
□ \$25.0	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:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



July 2, 2025

BABIS KARAMOLENGOS 531 SW CHOCTAW AVE FT. WHITE, FL 32038 US

SUBJECT: KRENTALS LLC Ref. Number: L23000405470

We have received your document for KRENTALS LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list a designation to the end of the new name of the company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

\* Correction made. Thank you.
7/14/25

Morgan E Lovett Regulatory Specialist II

Letter Number: 725A00014428

www.sunbiz.org

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Krentals LLC		
(Name of the Limite	ed Liability Company as it now appears on our recor (A Florida Limited Liability Company)	'ds.)
The Articles of Organization for this Limited Liz Florida document number L23000405470	ability Company were filed on 08/29/2023	
This amendment is submitted to amend the follo		
A. If amending name, enter the new name of	the limited liability company here:	
A2Z Water Softeners & Services LLC		
The new name must be distinguishable and contain the wo	ords "Limited Liability Company" the designation "I I d	On or the abbreviation to I on
Enter new principal offices address, if applica		of the above viziting (2.2.C.
(Principal office address MUST BE A STREET		
	*	
Enter new mailing address, if applicable:		5 %
(Mailing address MAY BE A POST OFFICE B		70 3
	<del></del>	
B. If amending the registered agent and/or reg	gistered office address on our records, enter	the name of the new registered
agent and/or the new registered office address	here:	
		EST
Name of New Registered Agent:		产品 3
New Registered Office Address:		
New Registered Office Address:	Enter Florida street addres	
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	, Flo	Orida
		ир соае

## 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
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			□Remove
			Change

- "Finng Fee: \$25.00"

	<del>-</del>
	TA CO
	55
tive date, if other than the date of filing:	(OBTIONAL)
effective date is listed, the date must be specific and cannot be prior to date of filing.  If the date inserted in this block does not meet the applicable statutory	filing requirements, this date will not be listed as
ment's effective date on the Department of State's records.	mic
	프로
ord 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
filed.	
d April 30 , 2025	
Signature of a member or authorized representation of the Babi's Haramolevyos	
Signature of a member or authorized represe	ntative of a member
•	

Filing Fee: \$25.00

July 2, 2025

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company.

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If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett

Regulatory Specialist II Letter Number: 725A00014426

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

+ NEXT, - PREV, 1. MENU, 2. FILING, 3. OFFICERS 7. LIST ENTER SELECTION AND CR:

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