LZ4000 495 199

(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 Filling Officer:





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12/09/24--01021--002 **25.00

· COVER LETTER

TO:

Registration Section

Div	ision of Cor	porations				
	King of Ho					
SUBJECT		Name of Lim	ited Liability Company			
The enclosed	Articles of .	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Lauren W. Stein				
	Name of Person					
		Balch & Bingham, LLC				
Firm/Company						
50 N. Laura St., Suite 2100						
			Address			
		Jacksonville, FL 32202		روه در وه ا		
	City/State and Zip Code					
		lstein@balch.com		75 D 75		
For further in	iformation c	E-mail address: (oncerning this matter, please co	to be used for future annual report n	SECRETAR SECRETAR		
Lauren W. S			904 348-6853	18 THE TOTAL TO SERVICE OF THE SERVI		
	Name o	f Person	at () Area Code Dayt	ime Telephone Number		
Enclosed is	check for th	ne following amount:				
☑ \$25.00 F	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		Street Address: Registration S	Section			
Division of Corporations			Division of Corporations			
P.O. Box 6327 Tallahassee, FL 32314				The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

King of Home Solutions, LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	nv as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000495199</u>	were filed on and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	4949 Sunbeam Rd.	
(Principal office address MUST BE A STREET ADDRESS)	Suite 2-3	
	Jacksonville, FL 32257	
Enter new mailing address, if applicable:	4949 Sunbeam Rd. Suite 2-3	
(Mailing address MAY BE A POST OFFICE BOX)		
	Jacksonville, FL 32257	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>enter the name of the new registere</u>	
New Registered Office Address:		
	Enter Florida street address	
New Registered Agent's Signature, if changing Registered Agent:	Enter Florida street address Florida City City City Code	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p	ee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and	

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>	<u>Name</u>	Address	Type of Action
P. S. T	Ryan Zabinsky	4949 Sunbeam Rd.	□Add
		Suite 2-3	□Remove
		Jacksonville, FL 32257	
			□Add
		·	□Remove
			□Add
			Remove TALL Change
			PAdd
			Change
			□Add
			□Remove
			□Add
			□Remove
			□Change

Signature of a member or authorized representative of a member

Typed or printed name of signee

Ryan Zabinsky