

P24000043364

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

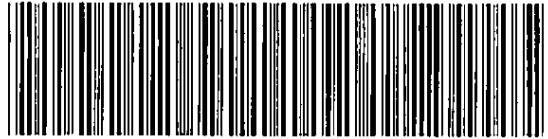
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

10/23/24  
file with

Office Use Only



900437466939

10/02/24--01032--020 3500

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TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 17, 2024

JOANNA ZAPIOR  
4180 116TH TERRACE N  
CLEARWATER, FL 33762

SUBJECT: BALA HOMES INC.  
Ref. Number: P24000043364

We have received your document for BALA HOMES INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This name is unavailable.

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.

Morgan E Lovett  
Regulatory Specialist II

Letter Number: 324A00022994

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TALLAHASSEE, FL

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

RE: New Corporation 600437221846 – Please Abandon  
P24000043364 – Name Change – Please Proceed

October 23, 2024

Dear Morgan Lovett,

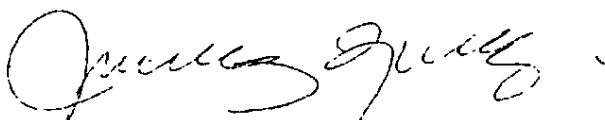
Please reject application for new business document 600437221846 for Calista Homes Inc. Additionally, I would like to abandon this "Calista Homes Inc" name and receive refund.

Please move forward with processing Profit Articles of Amendment request for Bala Homes Inc Document Number P24000043364. This request is for name change from Bala Homes Inc to Calista Homes Inc.

Please feel free to contact me with any question, thank you for your help in this matter.

Joanna Zapior  
4180 116<sup>th</sup> Terrace N  
Clearwater FL 33762  
Cell: 847-727-9998

Warm Regards,



Joanna Zapior

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TALLAHASSEE, FL

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Bala Homes Inc.

DOCUMENT NUMBER: P24000043364

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joanna Zapior  
Name of Contact Person  
Bala Homes Inc  
Firm/ Company  
4180 116th Terrace N  
Address  
Clearwater FL 33762  
City/ State and Zip Code  
sales@calista.net  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Joanna Zapior at ( 847 ) 727-9998  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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

Articles of Amendment  
to  
Articles of Incorporation  
of

Bala Homes Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P24000043364

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

Calista Homes Inc

*name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp., "Inc., " or Co., " or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

\_\_\_\_\_  
Signature of New Registered Agent, if changing

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change                      PT              John Doe

☒ Remove                      V              Mike Jones

☒ Add                      SV              Sally Smith

Type of Action (Check One)	Title	Name	Address
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1) <input type="checkbox"/> Change	_____	_____	_____
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<input type="checkbox"/> Add	_____	_____	_____
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<input type="checkbox"/> Remove	_____	_____	_____
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2) <input type="checkbox"/> Change	_____	_____	_____
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<input type="checkbox"/> Add	_____	_____	_____
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<input type="checkbox"/> Remove	_____	_____	_____
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3 ) <input type="checkbox"/> Change	_____	_____	_____
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<input type="checkbox"/> Add	_____	_____	_____
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<input type="checkbox"/> Remove	_____	_____	_____
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4) <input type="checkbox"/> Change	_____	_____	_____
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<input type="checkbox"/> Add	_____	_____	_____
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<input type="checkbox"/> Remove	_____	_____	_____
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5) <input type="checkbox"/> Change	_____	_____	_____
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<input type="checkbox"/> Add	_____	_____	_____
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<input type="checkbox"/> Remove	_____	_____	_____
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6) <input type="checkbox"/> Change	_____	_____	_____
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<input type="checkbox"/> Add	_____	_____	_____
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<input type="checkbox"/> Remove	_____	_____	_____
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(Attach additional sheets, if necessary). (Be specific)

(Attach additional sheets, if necessary). (Be specific)

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(if not applicable, indicate N/A)

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

09/27/2024

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

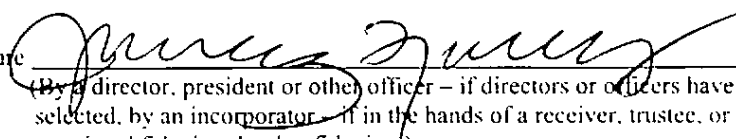
- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_  
(voting group)

09/27/2024  
Dated \_\_\_\_\_

Signature

  
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Joanna Zapior

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)

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