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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT . MAIL |
| (Business Entity Name) |
| (Document Number) |
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| Special Instructions to Filing Officer: |
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Effective Date 6/1/17

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MAY 3 0 2012 T. HAMPTON

COVER LETTER

| Division of Corporations |
|--|
| SUBJECT: LINMARK INVESTORS, LLC. |
| Name of Limited Liability Company |
| The enclosed Articles of Organization and fee(s) are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| LINDA RODRIGUEZ |
| . Name of Person |
| LINMARK INVESTORS, LLC. |
| Firm/Company |
| 12041 70TH ST. |
| Address |
| LARGO, FL 33773 |
| City/State and Zip Code |
| WALSTKID@GMAIL.COM E-mail address: (to be used for future annual report notification) |
| |
| For further information concerning this matter, please call: |
| LINDA RODRIGUEZ at (727) Area Code & Daytime Telephone Number |
| Name of Person Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy (additional copy is enclosed)}\$\$ Certified Copy (additional copy is enclosed) |
| Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301 |

Effective Date 6/1/12

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTIC | . I . N. | I - N | ame: |
|-------|----------|-------|------|

The name of the Limited Liability Company is:

LINMARK INVESTORS, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

Duin singl Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Mailing Address

| Principal Office Address: | Maning Address: |
|---------------------------|-----------------|
| 12041 70TH ST. | 12041 70TH ST. |
| LARGO, FL 33773 | LARGO, FL 33773 |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

| LINDA F | RODRIGUEZ |
|---------|--|
| | Name |
| 12041 | 70TH ST. |
| | Florida street address (P.O. Box NOT acceptable) |
| LARGO, | _{FL} 33773 |
| | City, State, and Zip |

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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 608, F.S..

gistered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| "MGRM" = Managing Member MGR. LINDA RODRIGUEZ 12041 70TH ST. LARGO, FL 33773 LEV: Effective date, if other than the date of filing: JUNE 01, 2012 (OPTION flective date is listed, the date must be specific and cannot be more than five business date days after the date of filing.) REOUIRED SIGNATURE: Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a doordment to the Department of State constitutes at third degree felony as provided for in s.817.155, F.S.) LINDA RODRIGUEZ Typed or printed name of signce | <u>Title:</u> "MGR" = Manager | Name and Address: |
|--|--|--|
| (Use attachment if necessary) LE V: Effective date, if other than the date of filing: JUNE 01, 2012 (OPTION fective date is listed, the date must be specific and cannot be more than five business dates after the date of filing.) REOUIRED SIGNATURE: (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) LINDA RODRIGUEZ Typed or printed name of signce | | per |
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)