

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

L18000236139

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : AVIATION LEGAL GROUP, P.A.  
Account Number : I20220000009  
Phone : (954)763-5565  
Fax Number : (954)827-7663

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: mollic.ferguson@gmail.com

2022 NOV 18 PM 3:31  
FILED  
FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

LP/LLP AMENDMENT/RESTATEMENT/CORRECTION  
LINMAC LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$52.50

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: LINMAC LLC

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:

Allison Sass

Name of Person

Aviation Legal Group, P.A.

Firm/Company

888 S. Andrews Avenue, suite 303

Address

Fort Lauderdale, FL 33316

City/State and Zip Code

mollie.ferguson@gmail.com

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

For further information concerning this matter, please call:

Allison Sass

954 763-5565  
at ( )

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

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**FILED**

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CLERK OF STATE  
TALLAHASSEE, FL

LINMAC LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 10/05/2018 and assigned  
Florida document number L18000236139.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

**(Principal office address MUST BE A STREET ADDRESS)**

650 NE 2nd Avenue

#3302

Miami, FL 33132

Enter new mailing address, if applicable:

**(Mailing address MAY BE A POST OFFICE BOX)**

650 NE 2nd Avenue

#3302

Miami, FL 33132

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Mollie Ferguson

New Registered Office Address:

650 NE 2nd Avenue, #3302

*Enter Florida street address*

Miami

Florida 33132

*City*

*Zip Code*

**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.*

Mollie Ferguson  
**If Changing Registered Agent, Signature of New Registered Agent**

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	Milton McConnell	320 NW 100th Avenue	<input type="checkbox"/> Add
		Plantation, FL 33324	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Linda McConnell	320 NW 100th Avenue	<input type="checkbox"/> Add
		Plantation, FL 33324	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Mollie Ferguson	650 NE 2nd Avenue, #3302	<input checked="" type="checkbox"/> Add
		Miami, FL 33132	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

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