20000011518

(Re	questor's Name)	<u>. </u>
(Add	dress)	
(Ado	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to I	Filing Officer:	
J .	HORNE PR 21 2025	

Office Use Only



700446284217

04/17/25--01001--020 1725.00

ALL AND SEED AND IN

2025 APR 17 AH 9:

TEGO

FICHIVED

CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 Fast 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WAIKIN

	WALKIN
PICK U	UP: <u>4/17 TRACI</u>
CERTIFIED COPY	
РНОТОСОРУ	
CUS	
FILING	LLC AMEND
AT REALTY, LLC	
CORPORATE NAME AND DOCU	IMENT #)
CORPORATE NAME AND DOCU	IMENT #)
CORPORATE, NAME, AND DOCU	(MEN 1 #)
CADDAD ATE NAME AND IMAGE	MENTE #6
COMPONATE NASIL AND TAXED	
CORPORATE NAME AND DOCU	IMENT #)
CORPORATE NAME AND DOCU	OMENT #)
INTERNATION OF THE STATE OF THE	
INSTRUCTIONS:	
	CERTIFIED COPY PHOTOCOPY CUS FILING AT REALTY, LLC CORPORATE NAME AND DOCK

Docusign Envalope ID: 66D1C4B6-475E-4DFB-858E-B037D58558B7

TO:	Registration Sec Division of Corp				
	AT REALT	Y, LLC			
SUBJE	СТ:	Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub			
		SHENIETA PALMER-DA	ANIELS		
			Name of Person		
		NISHAD KHAN P.L.			
			Firm/Company	· · · · ·	
		1303 N. ORANGE AVEN	UE		
		Address			
		ORLANDO, FL 32804			
			City/State and Zip Code		
		KRISTEN@NISHADKHA		· 	
For furt	her information co	b-mail address: (oncerning this matter, please c	to be used for future annual report notif	(Ication)	
	ETA PALMER-D		407 228-9711		
	Name of	Person	at () Area Code Daytime	e Telephone Number	
Enclose	d is a check for th	e 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)	
	Mailina Addrag		Stroot Address		

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

Docusign Envelope ID: 66D1C4B6-475E-4DFB-858E-B037D58558B7 ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2025 APP 17 CO

AT REALTY, LLC

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

(11 Florida Silinea al	iability Company)	•
The Articles of Organization for this Limited Liability Company villorida document number <u>L20000011518</u>	were filed on 12/30/2019	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
LINART REALTY, LLC		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
	·	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Florid: Florid:	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		

If Changing Registered Agent, Signature of New Registered Agent

Docusign Envelope ID: 66D1C486-475E-4DFB-858E-8037D58558B7
11 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
MGR_	Arthur Covas	9080 Kimberly Blvd.	
	Suite 12	□Remove	
		Boca Raton, FL 33434	☐ Change
		□Add	
			□Remove
			□Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change
			Add
		□Remove	
			□Change
			[] Add
			□Remove
			□Change

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an et <u>Note:</u>	tive date, if other than the date of filing:
If the reco record is f	rd 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 iled.
Dated	4/16/2025
	Signature of a member or authorized representative of a member
	Ben Schachter
	Typed or printed name of signee

Filing Fee: \$25.00