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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : INC AUTHORITY, LLC

Account Number : I20240000004

Phone : (775)329-7721 Fax Number : (775)376-9207

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

njoseph239@yahoo.com Email Address:\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

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N & Q\_INVESTMENTS, LLC

Certificate of Status	0
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M. SOLOMON

APR 1 6 2024

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	INVESTMENTS, LLC	
( <u>Nume of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 02/22/22	and assigned
Fiorida document number L22000084306		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
N & C The new name must be distinguishable and contain the words "Lin	HOLDINGS, LLC	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the	ie approviation "L.L.C."
Enter new principal offices address, if applicable:	reducing a constitution of a state of the st	
(Principal office address MUST BE A STREET ADDI	RESS <sub>I</sub>	<u> </u>
	a decidado do como esta e alcado e a como esta como	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BON)		
	***************************************	
B. If amending the registered agent and/or registered agent and/or the new registered office add	· ·	ter the name of the new
Name of New Registered Agent:	والمرابعة والمرابعة المرابعة والمرابعة والمرابعة والمرابعة والمرافقة والمرافقة والمرافقة والمرافقة والمرابعة والمرابعة	
New Registered Office Address:	Enter Florida street address	
	Florida	
	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.

If Changing Registered Agent, Signature of New Registered Agent

From Corporate Service Center Inc 1.702.507.9682 Mon Apr 15 14:23:49 2024 MDT Page 3 of 4

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 Title Name Type of Action Address □ Add \_\_\_\_\_ Remove \_\_\_\_ Change bb∧ □ ☐ Remove ☐ Change D Add □ Remove ☐ Chánge □ Add ☐ Remove Change □ Add Remove

\_\_\_\_\_ Change

☐ Change

🔲 Remove

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