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Special Instructions to Flung Officer:
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State of Florida Department of State

Lecrtify from the records of this office that LIN PROPERTIES LLC, is a limited liability company organized under the laws of the State of Florida, filed electronically on July 06, 2023, effective July 06, 2023.

The document number of this company is L23000320657.

I further certify that said company has paid all fees due this office through December 31, 2023, and its status is active.

I further certify that this is an electronically transmitted certificate authorized by section 15.16, Florida Statutes, and authenticated by the code noted below.

Authentication Code: 230709102154-200411745232#1

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Ninth day of July, 2023



Secretary of State

COVER LETTER

STIP IS	LIN	N PROPERTIES LLC		
SOBJEC		Name of Limi	ted Liability Company	
The encl	osed Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
	BJECT:			
		Zhanna Kelley		
			Name of Person	
			and fee(s) are submitted for filing. erning this matter to the following: anna Kelley Name of Person Firm/Company C Edgewater Park Address Address Address City/State and Zip Code .cpa.tax@gmail.com E-mail address: (to be used for future annual report notification) is matter, please call: at (201) 230-5498 Area Code Daytime Telephone Number amount: D Filing Fee & Certified Copy (additional copy is enclosed) Street Address: Registration Section	
		168C Edge wat er	Park	Person Impany It Zip Code Iture annual report notification) D1 230-5498 I Code Daytime Telephone Number Filing Fee & Certificate of Status & Cer
			bmitted for filing. r to the following: Name of Person Firm/Company r Park Address City/State and Zip Code mail.com (to be used for future annual report notification) call: at (201) 230-5498 Area Code Daytime Telephone Number S55.00 Filing Fee & Certified Copy (additional copy is enclosed) Street Address: Registration Section Division of Corporations	
		Bronx, NY 10465		<u> </u>
		nys.cpa.tax@gm	ail.com	(ification)
For furth	ner information c			
Zhan	na Kelley		at (201) 230-549	8
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclose	d is a check for th	nc following amount:		
□ \$ 25	.00 Filing Fce		Certified Copy	Certificate of Status & Certified Copy
	Registration 5	Section	Registration S	
	P.O. Box 632 Tallahassee,			
	i amanassee,	E 40 040 FT	=	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LIN PROPERTIES LLC

(Name of the Limited Liability Comps (A Florida Limited	ny as it now appe Liability Company	ears on our records.)	<u> </u>
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000313454</u>	were filed on _	July 6, 2024	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company	<u>here</u> :	
LIN RENTAL LLC			<u>. </u>
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the	e designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
			- 2
			 7. .)
Enter new mailing address, if applicable:			<u></u>
(Mailing address MAY BE A POST OFFICE BOX)			
			7-3
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our	records, <u>enter the na</u>	ame of the new regist
Name of New Registered Agent:			
New Registered Office Address:	Enter F	Floridu 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or remove	ea trom our records:		
MGR =	Manager		
AMBR =	Authorized Member		

<u>Title</u>	<u>Name</u>	Address	Type of Action
-			DAdd
			□ Remove
			☐ Change
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Effective date, if other than the date of filing: If an effective date, if other than the date of filing: (optional) If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 Note; If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. e record 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 rd is filed. Dated August 16 2024 The White August 16 2024 Signature of a member or authorized representative of a member					
Effective date, if other than the date of filing:					
Effective date, if other than the date of filing:					
Effective date, if other than the date of filing:					_
Effective date, if other than the date of filing:				<u> </u>	_
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