

M23000011209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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APPROVED
AND
FILED

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE
STATE OF FLORIDA**

We, the undersigned, do hereby certify that I am the Authorized Person
of Property Solutions Partners, LLC
(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of
Georgia
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 605.0112, F.S., the limited liability company hereby adopts the
following name to transact business in the state of Florida:

Property Solutions Partners of FL, LLC
(Name to be used by limited liability company in Florida. NOTE: Name must contain Limited Liability
Company, L.L.C., or LLC.)

Kathy Jo Mason (tw) 11/20/23
Signature Authorized Person Date

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FILED
MAY 10 2023