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(((H240000563713)))



H240000563713ABC

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Division of Corporations

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Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

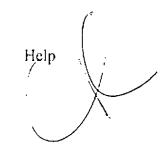
\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## REGISTERED AGENT CHANGE LINDE INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ci	hange is submitted for a corpora	2. 617.0502, 607.1508, or 617.1508, Florida Statutes, this ution organized under the laws of the State of Delawate				
		e or registered agent, or both, in the State of Florida.				
1. The name o	of the corporation: LINDE INC.					
	al office address:					
3. The mailing	address (if different):					
4. Date of inco	prporation/qualification: 12/09/19	988 Document number: P22052				
	nd street address of the current re partment of State: (If resigned, en	egistered agent and registered office on file with the nter resigned)				
	THE PRENTICE-HALL COR	PORATION SYSTEM, INC.				
	1201 HAYS STREET					
	TALLAHASSEE, FL 32301					
6. The name at (if changed)		stered agent (if changed) and /or registered office				
	United Agent Group Inc.					
	801 US Highway 1					
	North Palm Beach, FL 33408	P.O. Box NOT acceptable				
The street add as changed wi	ress of its registered office and II be identical.	the street address of the business office of its registered agent,				
Such change v authorized by	was authorized by resolution du the board, or the corporation ha	ly adopted by its board of directors or by an officer so as been notified in writing of the change.				
Tas	ha dwards	Tasha Edwards, Attorney-in-Fact Printed or typed name and title				
l further agrée of my duties, a document is be	ot the appointment as registered to comply with the provisions and I am familiar with and acce eing filed merely to reflect a ch as been notified in writing of th	I agent and agree to act in this capacity. of all statutes relative to the proper and complete performance opt the obligation of my position as registered agent. Or, if this ange in the registered office address. I hereby confirm that the				
Tasko	a Cdwards Ignature of Registered Agent	02/09/2024 Date				
If signing on b	ochalf of an entity:					
Tasha Edwards	s, Special Secretary					
	Typed or Printed Name	<del></del>				
	* * * FI	LING FEE: \$35.00 * * *				