

09/30/2023, 18:58

Division of Corporations

L22000170455

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
 Fax Number : (850)617-6383

From: Account Name : EAST COAST MULTISERVICE INC  
 Account Number : I20230000142  
 Phone : (305)631-2190  
 Fax Number : (786)713-1965

FILED  
OCT 10 2023

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

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
INVESTMENT ADVISER COMPLIANCE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

RECEIVED  
OCT 10 11:10:39  
DIVISION OF CORPORATIONS  
FLORIDA

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 10-23-2023 OCT 10 10:55 AM 2023

INVESTMENT ADVISER COMPLIANCE, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 10/08/2023 and assigned Florida document number 1.22000170455

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

PRIMELINK VENTURES LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1275 W 47TH PL

(Principal office address MUST BE A STREET ADDRESS)

SUITE 312

HALEAH, FL 33012

Enter new mailing address, if applicable:

1275 W 47TH PL

(Mailing address MAY BE A POST OFFICE BOX)

SUITE 312

HALEAH, FL 33012

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

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

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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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

Multiple horizontal lines for text entry, currently blank.

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2023 OCT 10 11:53 AM  
CORPORATE SERVICES

**E. Effective date, if other than the date of filing:** N/A **(optional)**

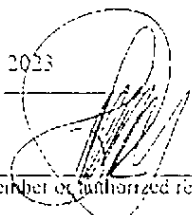
*(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (2)(b)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records

If the 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 record is filed

Dated OCTOBER 2

2023



Signature of a member or authorized representative of a member

MICHELE EUGENIO PODESTA

Typed or printed name of signee