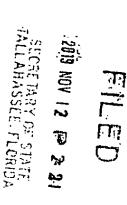
L13 0000 71958

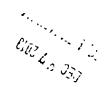
Office Use Only



900336317989

11/12/13--01091--000 **25.00





COVER LETTER

	gistration Se ision of Cor							
SIERIFCT:		T CAPITAL LLC						
SOBRECT.	Name of Limited Liability Company							
The enclosed	d Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please return	all correspo	ondence concerning this matter	to the following:					
		RICARDO URIBE						
		.	Name of Person					
		LINKVEST CAPITAL LI	_C					
	Firm/Company							
	175 SW 7TH ST. SUITE 2101							
			Address					
	MIAMI, FL. 33130 City/State and Zip Code							
		enino@linkvestcapital.com E-mail address: (to be used for future annual report notification)						
For further in	ulormation c	oncerning this matter, please c	all:					
RICARDO URIBE 305 523 65 76								
	Name o	f Person	at () Area Code Daytime	Telephone Number				
Enclosed is a	rcheck for th	ne following amount:						
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed				

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Taliahassee, Ft. 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



LINKVEST CAPITAL LLC

(Name of the Limited Liability Company as it now appears on our record NOV 12 2 24

The Articles of Organization for this Limited Liability Company	were filed on 05/16/	2013 SECRE FARY OF STATE TALLAHASSEE TEORISMO
Florida document number L13000071958		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "I imited I iabil	ity Company," the desig	nation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ir records, enter the name of the new
registered agent and/or the new registered office address nero	<u>c.</u>	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	street address
		, Florida Zip Code
	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

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>	Type of Action
MGR	URIBE, JORGE A. JR	175 SW 7TH STREET	
		SUITE 2101	Add
			Remove
		MIAMI, FL 33130	Change
			Add
			□ Remove
			□ Change
			Remove
			Change
			□ Remove
			☐ Change
			☐ Remove
			Change
			□ Remove
			☐ Change

			
	···		
			
		· •	·

	-		
	10/01/2019		
ective date, if other than the date must be	ate of filing:	(opti	onal)
terective date is fisted, the date must be ter. If the date inserted in this bloc rument's effective date on the Dep	c does not meet the applicable s	e of filing or more than 90 days after statutory filing requirements, thi	s date will not be listed a
comean serience date on the rep	adment of state s records.		
record specifies a delayed e	ffective date, but not an	effective time, at 12:01	a.m. on the earlier
he 90th day after the recor		·	
NOVEMBER 6TH	2019		
led	··	•	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00

Linkvest Capital LLC 175 SW 7th St. Suite 2101 Miami, FL. 33130

November 07th, 2019

To Whom It May Concern,

Our daytime telephone number is (305)5236576 and the address is 175 SW 7th St. Suite 2101. Miami FL 33130

Thank you.

Laura V. Lonckno



Phone: +1 (305) 523 6576

Email: llondono@linkvestcapital.com