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(Re	questor's Name)						
(Address)								
(Ad	ldress)							
(Cit	ty/State/Zip/Phor	ne #)						
PICK-UP	MAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies	_ Certificate	es of Status						
Special Instructions to Filing Officer:								

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2020 JUN 26 PH 5: I'S SECRETABLY OF STATE

D. BRUCE AUG 12 2020



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: June 24, 2020

Order#: 333985/005

Re: CAPITALINK, L.L.C.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 _.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there any problems or questions with this filing, please call our office.

INCA.XCOA

2020 JUN 26 PM 5: I'S EXT

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Na	ame of the limited liability company: CAPITALINK, L.	L.C.					
2. (a)	4400 BISCAYNE BOULEVARD		(b) 4400 BISCAYNE BOULEVARD				
<u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of li (Note: MAY BE I			-
	14TH FLOOR		14TH FLO	OOR			
	MIAMI, FL 33137	_	MIAMI, FI	L 33137			
	09/23/1998		L98000001	1964			
3.	Date of filing/registration in Florida	4.		Document numb	er		
5. (a)	CORPORATE CREATIONS NETWORK, INC.						
J. (1)	Registered Agent and Registered Office shown on the records of t	he Flori	da Dept. of State	– e:			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE.	<u>SS)</u>	_			
					رن (11)	202	
	NORTH PALM BEACH FL	33408		-	ORE DA	2020 JUN 2	
<i>(</i> 1.)						9	9
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	nddress:	-	<u> </u>	-0 - X	; manuag
					ന	نن	
	Corporation Service Company			_		20	
	NEW Registered Office Address:						
	1201 Hays Street			_			
	Tallahassee, FL	32301		_			
change agent was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members o icles of organization or the operating agreement of the	registe ibility of f the li	red office an company, it is mited liabilit	d the business of s hereby confirm y company or as	fice of the ed that the	registe change	red e(s)
	/s/ Abby Henig	Al	oby Henig, Au	uthorized Person			
•	iture of a member or authorized representative of a member			Printed or typed na			
provis the ob- to mer notifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided elv reflect a change in the registered office address. I have a change in the registered office address. I have a change in the registered office address. I have a change in the properties of this change.	ee to a perfori I for in iereby	ct in this cape nance of my e Chapter 603 confirm that	acity. I further a duties, and I am j 5. F.S. Or, if this the limited liabil	gree to con familiar wi document ity compan	nply w ith and is bein y has l	ith the accept g filed seen
	Iraca C-Kubly						
_	ire of Registered Agent (*) ace E. Kirby, Asst. Vice President of Corporation Service Company	,					

Grace E. Kirby, Asst. Vice President of Corporation Service Company
Division of Corporations • P.O. I