

m1900000 6125

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

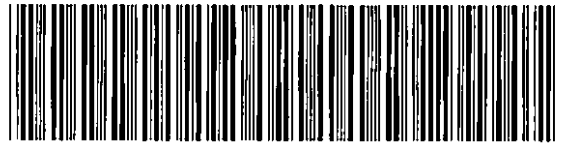
(Document Number)

Certified Copies _____ Certificates of Status _____

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2024 JUN 27 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

Amend/Name Change

JUN 27 2024

D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PNC Management Holdings LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Autumn Kavney

Name of Person

Firm/Company

270 Northpointe Pkwy Suite 20

Address

Amherst, NY 14228

City/State and Zip Code

akavney@rescapitalpartners.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Autumn Kavney

at (716) 332-1552

Name of Person

Area Code & Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☒ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E055 (9/15)

FILED

2024 JUN 27 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FL



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 17, 2024

AUTUMN KAVNEY
270 NORTHPOINTE PKWY, SUITE 20
AMHERST, NY 14228

SUBJECT: PNC MANAGEMENT HOLDINGS LLC
Ref. Number: M19000006125

We have received your document for PNC MANAGEMENT HOLDINGS LLC and your check(s) totaling \$30.00. However, the document has not been filed and is being retained in this office for the following:

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Operations Manager A

Letter Number: 924A00013141

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of

State: PNC Management Holdings LLC

Enter new principal office address, if applicable: 270 Northpointe Pkwy Suite 20

(Principal office address Amherst, NY 14228

MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: 270 Northpointe Pkwy Suite 20

(Mailing address Amherst, NY 14228

MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M19000006125

3. Jurisdiction of its organization: New York

4. Date authorized to do business in Florida: 6/14/2019

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Chainlink Services LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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: Registered Agents Inc

New Registered Office Address: 7901 4th St N STE 300

Enter Florida Street Address

St. Petersburg

City

Florida 33702

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.

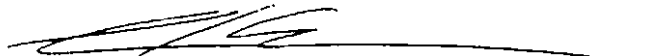

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

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

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Eli Hazzan
Typed or printed name of signee

Filing Fee: \$25.00

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, BRENDAN C. HUGHES, Acting Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: CHAINLINK SERVICES LLC
DOS ID Number: 5479107
Entity Type: DOMESTIC LIMITED LIABILITY COMPANY
Entity Status: EXISTING
Date of Initial Filing with DOS: 01/22/2019
Statement Status: CURRENT
Statement Due Date: 01/31/2025

I certify that the following is a list of documents on file in the Department of State for said entity:

Document Type: ARTICLES OF ORGANIZATION
Date of Filing: 01/22/2019
Entity Name: PNC MANAGEMENT HOLDINGS LLC

Document Type: CERTIFICATE OF PUBLICATION
Date of Filing: 05/15/2019

Document Type: BIENNIAL STATEMENT
Date of Filing: 07/22/2021

Document Type: BIENNIAL STATEMENT
Date of Filing: 04/11/2023
Effective Date: 01/01/2023

Document Type: CERTIFICATE OF AMENDMENT
Date of Filing: 09/11/2023
Name Changed To: CHAINLINK SERVICES LLC

Document Type: CERTIFICATE OF CHANGE BY ENTITY
Date of Filing: 02/26/2024

No information is available from this office regarding the financial condition, business activity or practices of this entity.

WITNESS my hand and official seal of the Department
of State, at the City of Albany, on May 14, 2024 at
03:52 P.M.



Brendan C. Hughes

BRENDAN C. HUGHES
Acting Secretary of State