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TRANSMITTAL LETTER

TO: Registration Section Division of Corporations

SUBJECT: ZWICK WOLT CARE SULTIMS
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANDRE DE OLIVEIRA
(Name of Person)

ZUrich myste use Solutions
(Firm/Company)

470 June Dures Wyy

(Address)

June Beyl Fl 33408
(City/State and Zip Code)

For further information concerning this matter, please call:

ANDRE DEOLVEIRA at J61 756-4531
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

X \$25.00 Filing 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)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

The Articles of Organization were filed on June 14, 2004 document number __L04000044648___. and assigned FIRST: SECOND: The following amendment(s) to the Articles of Organization was/were adopted by the limited The removal of <u>DE'OLIVEIRA</u>, ANDRE from the LLC Zurch nortgage solutions. Dated November Signature of a member or authorized representative of a member ANDRE

Filing Fee: \$25.00