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SECRETARY OF SIATION OF CORPORATION

COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	Name of Limit	d Liability Company	LC_
The enclosed Articles of	Amendment and fee(s) are sub	nitted for filing.	
Please return all correspo	ondence concerning this matter t	to the following:	
	Alexa	endra Hone	gjer
	SWISS	Name of Person O /W/EST/M Firm/Company	ENTS, LLO
	POB	7 C/ Address	
	Indian ahones E-mail address dic	ROCKS Beac City/State and Zip Code 3 P6 3 D-a o / o be used for future annual report notifica	4 77 33785 . Com
For further information c	oncerning this matter, please ca		
Marlis Name o	HONESJEV FPerson	at (727) GPP- Area Code & Daytime	- 0641 Telephone Number
Enclosed is a check for th	ne following amount: \$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)

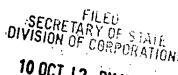
MAILING ADDRESS:

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
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



OI	1111	OCT 12 PM 12: 41			
KISAG U.	SA, LLC	111/2:41			
(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 $\frac{02}{21}$ and assigned					
Florida document number <u>L 07 0000 19506</u>					
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	ity company here:				
SWISSCO INVEST. The new name must be distinguishable and end with the words "Limit	MENTS, LLC				
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation	on "LLC" or the abbreviation			
Enter new principal offices address, if applicable:		<u></u>			
(Principal office address MUST BE A STREET ADDRESS)	13151 A 91st # 806 A Largo, FL. 3	StR. N.			
	# 806 A				
	Largo, TL. 3	33773			
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)	40B 751	Beach FL 33781			
	Indian Kocks	Beach 7L 33781			
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:					
registered agent analyst the new registered office address nere	•				
Name of New Registered Agent:					
New Registered Office Address:					
	Enter Florida street address				
, Florida City 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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member Title Type of Action Name <u>Address</u> MARM **⊠** Add Remove ☐ Add Remove Add ☐ Remove ☐ Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member Marlis Honesse

Page 2 of 2

Filing Fee: \$25.00