L12000070730

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COVER LETTER

Division of Co	rporations		
SUBJECT:	SCI GR	OUP, LLC	
	Name of Limited	Liability Company	
The enclosed Articles of	f Amendment and fee(s) are submit	ted for filing.	
Please return all corresponder	ondence concerning this matter to t	he following:	
	STEPHE	N E VETIAQUE	
		Name of Person	
	STEF	PS FINANCIAL	
		Firm/Company	
	PO E	3OX 610333	
	····· -· ··· -· ···	Address	
	NORTH	MIAMI, FL 3326	1
		ity/State and Zip Code	
	•	invest@gmail.com used for future annual report notification	n)
For further information of	concerning this matter, please call:		
STEPHEN	E VETIAQUE	at (305) 778-922	29
Name o	of Person	Area Code & Daytime Tele	
Enclosed is a check for t	the following amount:		•
□ \$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)

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 FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATION

FROM: Stephen E. Vetiaque

PO BOX 610333

North Miami, FL 33261

(305) 778 - 9229

ADDENDUM:

STEPS FINANCIAL, LLC 511 NE 175th TER N. Miami Beach, FL 33162

Corporate Purpose:

Business Consulting (Strategic Planning), Credit Restoration, Immigration Services & Interpretations, Document translations, Web-Design & E-marketing, Promotions & Tax Services.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SCI GRO	OUP, LLC
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our records.)
The Articles of Organization for this Limited Liability Company Florida document number L12000070730	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
STEPS FINANCIAL, LLC	
The new name must be distinguishable and end with the words "Limi L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	511 NE 175th TER
(Principal office address MUST BE A STREET ADDRESS)	NORTH MIAMI BEACH, FL 33162
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 610333 NORTH MIAMI, FL 33261
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:	<u>e</u> :
	Enter Florida street address
·	, Florida
	Citv 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 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 **Type of Action Title** <u>Name</u> **Address** Remove Add Remove Remove Remove Remove Add Remove

. If amer	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
1	<u> </u>
 ted	
<u>-</u>	Que Co.
	Signature of a member of authorized representative of a member Stephen E. V. Hague
	Typed or printed name of signee Page 3 of 3

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Filing Fee: \$25.00