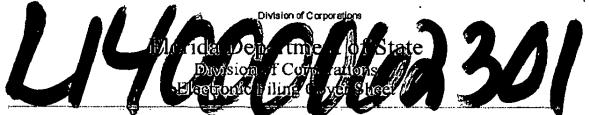
5/12/2015



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(((H15000115306 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RICHARDS & ASSOCIATES, PA.

Account Number: I20110000091

: (305)858-9900

Phone Fax Number

: (305)285-0015

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SWISSCO NEW ZEALAND LLC

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14



COVER LETTER

TQ: Registration Section Division of Corporations SWISSCO NEW: ZELAND LLC SUBJECT: 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:

	PATRICIA MENENDEZ		
	· · · · · · · · · · · · · · · · · · ·	Name of Person	
	RICHARDS & ASSOCIAT	ES, P.A.	
		Firm/Company	
	2665 SOUTH BAYSHORE	DRIVE, SUITE 703	
		Address	
	MIAMI, FL 33133		
		City/State and Zip Coo	ka
	PMENENDEZ@RICHARDS	S-LAW.COM	
	E-mail address: (to	be used for future annu	al report notification)
For further information co	nearning this matter, please cel	} :	
PATRICIA MENENDEZ		30'5 {	358-9900
Name of	Person	Area Code	Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing Fee

□ \$30.00 Filing Fee & Certificate of Status □ \$55.00 Filing Fee & Certified Copy (additional copy is enclused) 13-\$60.00 Filing Fea, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

(HISOCOIIS3063)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

This amendment is submitted to amend the following: A. If amending name, enter the new pame of the limited liability company here: FLORIDA FAMILY MANAGEMENT OFFICE LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: [Principal office address MUST BE A STREET ADDRESS] Enter new mailing address, if applicable: [Mailing address MAY BE A POST OFFICE BOX] [B. If amending the registered agent and/or registered office address on our records, guter the name of the new registered office address here: Name of New Registered Agent New Registered Office Address	(Name of the Limited Linkliky County (A Plovide Limited)	eny ay is now appears on our records.) Leability Company)		
A. If smending name, enter the new name of the limited liability company here: FLORIDA FAMILY MANAGEMENT OFFICE LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.I.C" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing address MAY BE A POST OFFICE BOX) Enter new mailing address MAY BE A POST OFFICE BOX) FT. LAUDERDALE, FL 33334 B. If smending the registered agent and/or registered office address on our records, enter the name of the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida presendatess Florida Florida Florida Florida	The Articles of Organization for this Limited Liability Company Florida document number L1400062301	were filed on 4/16/2014	and assigned	
FLORIDA FAMILY MANAGEMENT OFFICE LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing address MAY BE A POST OFFICE BOX) Enter new mailing the registered agent and/or registered office address on our records, enter the name of the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	This amendment is submitted to amend the following:		·	
The new rame must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing the registered agent and/or registered office address on our records, enter the nange of the new registered office address on our records, enter the nange of the new registered office address. Name of New Registered Agent: New Registered Office Address: Enter Florida sweet address Florida	A. If amending name, enter the new name of the limited lish	dlity company here:		
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) Enter new mailing the registered agent and/or registered office address on our records, enter the pant of the new registered office address on our records, enter the pant of the new registered office address on our records, enter the pant of the new registered office address on our records, enter the pant of the new registered office address on our records, enter the pant of the new registered office address on our records, enter the pant of the new registered office address on our records, enter the pant of the new registered office address on our records, enter the pant of the new registered office address on our records, enter the pant of the new registered office address. Enter Florida street address. Enter Florida street address.	FLORIDA FAMILY MANAGEMENT OFFICE LLC			
### Comparison office address MUST BE A STREET ADDRESS! SUITE 500	The new name must be distinguishable and contain the words "Limited Liabi	htty Company," the designation "LLC" or the	abbreviation "L.L.C."	
### Comparison of the new registered agent and/or registered office address on our records, enter the name of New Registered Agent: New Registered Office Address: Suffe Soo	Enter new principal offices address, if applicable:	1000 CORPORATE DRIVE		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	· · · · · · · · · · · · · · · · · · ·	SUITE 500		
SUFTE 500 SUFTE 500 FT. LAUDERDALE, FL 33334 B. If amending the registered agent and/or registered office address on our records, enter the name of the flew registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida		FF. LAUDERDALE, FL 33334		
Modifing address MAY BE A POST OFFICE BOX) SUFTE 500 FT. LAUDERDALE, FL 33334 B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	Enter new muiling address, if applicable:	1000 CORPORATE DRIVE	*	
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida	(Mailing address MAX BE A POST OFFICE BOX)	SUFTE 500		
Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida		FT. LAUDERDALE, FL 33394		
	registered agent and/or the new registered office address here Name of New Registered Agent:	Enter Florida street address	2	ワーファ
		Clty , Florida	Zip Code	

New Registered Agent's Signature, if changing Registered Agent;

SWISSCO NEW ZEALAND LLC

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 fumiliar 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

MGR = Manager

AMBR = Authorized Member

(H120001123063)

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added ut removed from our records:

Title Name Address Type of Action MGR SUSHMA CHHABRA 1000 CORPORATE DRIVE ₩ Add SUITE 500 □ Remove FT. LAUDERDALE, FL 33334 _🗀 Change □ Add □ Remove □ Ciange D Grander .□ Кеточе □ Change □ Remove ___ Change

Page 2 of 3

·	ing any other information; enter change(s) here: (Atiach additional sheets, if necessary.)		
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The 90	th day after the record is filed.		#
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Dated		~	
	Signature of a member of anthorized appresentative of a member		
	Diane Sua moto Typed of pulpied name of signee		

Page 3 of 3

Filing Fee: \$25.00