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2022 MAR -8 AM 6: 59

SECRETARY OF STATE
TALLAHASSEF

COVER LETTER

Registration Section Division of Corporations

TO:

MERKTH SUBJECT:	UIS USA LLC		
SOBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub	-	
Please return all correspondence	ondence concerning this matter	to the following:	
	FABRICE HERZSTEIN		
		Name of Person	
		Firm/Company	
	20803 BISCAYNE BLVD	, SUITE 440	
		Address	
	AVENTURA, FL, 33180		
		City/State and Zip Code	
	FABRICE@MCHCONSUI		
		to be used for future annual report not	incanon)
For further information of	concerning this matter, please c	all:	
FABRICE HERZSTEIN	1	786 785-5000 at ()	
Name (of Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of O P.O. Box 63: Tallahassee,	Section Corporations 27	Street Address: Registration So Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

MERKTHUIS USA LLC

2022 MAR -8 AM 6:59

(Name of the Limited Liability Company as it now appears on our records:) RETARY OF STATE

(A Florida Limited Liability Company)

TALLAHASSEE, FI The Articles of Organization for this Limited Liability Company were filed on Oct 26, 2016 Florida document number L16000197639 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NBX-USA LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.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) 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 __ City

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	RUBEN VERHELST	SINT-ALDEGONDISKAAI 36	∃ A đ d
		ANTWERP, BELGIUM, 2000	□Remove
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. Effectiv	e date, if other than the date of filing: (optional) tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,020
(If an effect	tive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020
	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as at's effective date on the Department of State's records.
the record	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
cord is filed	
Dated_	ebruary 28 2027
	Signature of a member or authorized representative of a member
	ERIK SAELENS

Filing Fee: \$25.00