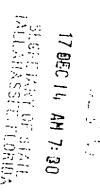
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TO: Registration Section Division of Corporati USCI GROU SUBJECT:		
The enclosed Articles of Amend	dment and fee(s) are submitted for filing.	
Please return all correspondence	e concerning this matter to the following:	
	DIEGO L PINTO	
	Name of Person	
	N/A	
	Firm/Company	
	7000 W PALMETTO PARK RD SUITE 210,	
	Address	
	BOCA RATON, FL 33433	
	City/State and Zip Code DIEGO@USCLGROUP	
	E-mail address: (to be used for future annual report notification)	
For further information concern		
DIEGO L PIN'	<u>'</u> at ()	_
Name of Person	n Area Code Daytime Telephone Number	
Enclosed is a check for the follo	owing amount:	
■ \$25.00 Filing Fee □ \$	\$30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing F Certificate of Status Certified Copy Certificate of S (additional copy is enclosed) Certified Copy (additional copy is	Status &
MAILING A Registration S Division of C P.O. Box 632 Tallahassee, F	Section Registration Section orporations Division of Corporations 7 Clifton Building	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

USCI GROUP LLC (Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company) 04/11/2017 The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number ____L17000081767 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: SCHWETER NETWORK LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." 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

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.

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

If Changing Registered Agent, Signature of New Registered Agent

f amend or remov	ling Authorized Perso yed from our records:	n(s) authorized t	o manage, <u>enter the</u>	title, name, and addre	ss of each person being added
MĞR = AMBR =	Manager - Authorized Member				
<u> Fitle</u>	<u>Name</u>		Address		Type of Action
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D. If am	ending any other infor	mation, enter change(s) here: (Attach additional sheets, if necessary.)	
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E. Effec	tive date, if other than	the date of filing:(optional)	BC 0207 (21)
Note	: If the date inserted in thi	must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 s block does not meet the applicable statutory filing requirements, this date will not be li	sted as the
docui	ment's effective date on th	Department of State's records.	
If the re	ecord specifies a dela e 90th day after the	li yed effective date, but not an effective time, at 12:01 a.m. on the ear record is filed.	lier of:
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Dated	dDECEMBER	5TH 2017	
		Signature of a member or authorized representative of a member	
		DIEGO L PINTO	
		Typed or printed name of signee	
		Page 3 of 3	

Filing Fee: \$25.00