

L17 0000 81767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

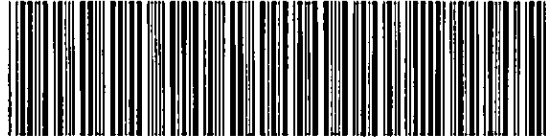
(Business Entity Name)

(Document Number)

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JUL 27 2020

2020 JUL 27 PM 6:35  
DEPARTMENT OF STATE  
DIVISION OF CORPORATION  
FALL RIVER, MA 01937

FILED

SEP 17 2020

S. YOUNG

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SCHWETER NETWORK, LLC  
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:

DIEGO LOPES PINTO

Name of Person

N/A

Firm/Company

2607 Vineville Ave Suite 105,

Address

Macon, GA 31204

City/State and Zip Code

DIEGO@USCI.GROUP

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DIEGO L PINTO

Name of Person

at ( 561 ) 305-0584

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 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FILED  
2020 JUL 27 PM 6:35  
CLERK OF DISTRICT COURT  
JUL 27 2020  
DISTRICT COURT  
CLERK

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

This amendment is submitted to amend the following:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

2607 Vineville Ave Suite 105,  
Macon, GA 31204

2607 Vineville Ave Suite 105,  
Macon, GA 31204

Zip Code

**If Changing Registered Agent, Signature of New Registered Agent**

[illegible]

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

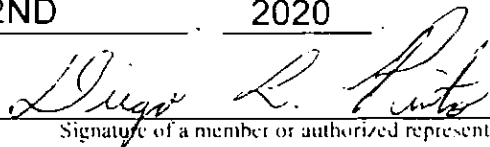
E. Effective date, if other than the date of filing: 07/22/2020 (optional)

(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated JULY 22ND, 2020



Signature of a member or authorized representative of a member

DIEGO LOPES PINTO

Typed or printed name of signee