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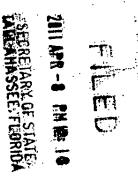
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C. LEWIS

APR 1 1 2011

EXAMINER

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: ORION PROF	PERTY INVESTMENTS, LP
	tnership or Limited Liability Limited Partnership
	and the second s
The enclosed Certificate of Amendment ar	nd fee(s) are submitted for filing.
Please return all correspondence concernir	ng this matter to:
DIANA P. RAMIREZ	
Contact Person	
ORION PROPERTY MANAGEM	MENT, LP
Firm/Company	
727 TUSCANNY ST.	
Address	· · · · · · · · · · · · · · · · · · ·
BRANDON, FL 33511	
City, State and Zip Code	
DRamirez@OrionPropertyManag	gement.net
E-mail address: (to be used for future annual	report notification)
For further information concerning this ma	tter, please call:
Diana Damina	0.40 0.470
Diana Ramirez Name of Contact Person	at (813) 842-0476 Area Code and Daytime Telephone Number
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a check for the following amou	unt:
\$52.50 Filing Fee \$\sqrt{\$61.25}\$ Filing Fee	\$105.00 Filing Fee \$113.75 Filing Fee,
and Certificate of	and Certified Copy Certified Copy, and
Status	Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

FILED

2011 APR -8 PM 12: 18

SECRETARY OF STATE!

ORION PROPERTY INVESTMENTS, LP

Insert name currently on file with Florida Department of State

	·,
	lorida Statutes, this Florida limited partnership or cate was filed with the Florida Department of State on rida document number
adopts the following certificate of amendment to	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the linere:	imited partnership or limited liability limited partnership
ORION PROPERT	Y MANAGEMENT, LP
	nable and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnersh Acceptable Limited Liability Limited Partnership suffixes: I	
B. If amending mailing address and/or principal office address here:	pal office address, enter new mailing address and/or
New Principal Office Address:	
(Must be STREET address)	· · · · · · · · · · · · · · · · · · ·
New Mailing Address:	PO BOX 235
(May be post office box)	VALRICO, FL 33595
•	
	ered office address on our records, enter the name of the
new registered agent and/or the new registered offic	e address here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code

FILED

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

2011 APR -8 PM PR 15

I hereby accept the appointment as registered agent and agree to act in this capacity. The Hand SEE GEORIDA 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.

If Changing Registered Agent, Signature of New Registered Agent

D.	If amending the general partner	s), <u>enter</u>	r the name	and	<u>business</u>	address	of each	general	partner	being
ade	ded or removed from our records:									

<u>Title</u>	Name	Address	Type of Action
			Add Remove
			Add Remove
***************************************			Add Remove
			Add Remove
			Add Remove
			Add Remove
	l partnership or limited liability hip" status, enter change here:	limited partnership is ame	nding its "limited liability
This Limit	ed Partnership hereby elects to be	a "Limited Liability Limited l	Partnership."
This Limite	ed Partnership hereby removes its	"Limited Liability Limited Pa	artnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

ffective date, if other than the date of filing:	April 15, 2011 the date this document is filed by the Florida Department of
Effective date cannot be prior to nor more than 90 days after tate.)	tne aate this accument is juea by the Florida Department of
<u>ignature(s) of a general partner or all general p</u>	artners*:
*NOTE: Only one current general partner is required to sign emoving a "limited liability limited partnership" election state then adding or removing a "limited liability limited partnersh	ement. Chapter 620, F.S., requires all general partners to sign
4010111 D	
Nor Mobate Liquidibis	
Maria P. Laur	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
ignature(s) of all new or dissociating general pa	rtner(s), if any:

filing Fee: \$52.50	
Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	SET