

L100VVVV41478

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

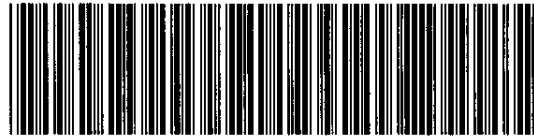
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

B. KOHR  
JAN 21 2011  
EXAMINER

FILED  
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11 JAN 21 PM 2:02

# LAZARUS

## CORPORATE FILING SERVICE

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. ORBITO, LLC  
(Corporation Name) (Document #)
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time

2:06

☐ Certified Copy

☐ Mail out

☐ Will wait

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☐ Certificate of Status

### NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☐ Limited Liability
- ☐ Domestication
- ☐ Other

### OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

### AMENDMENTS

- ☒ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

### REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

Examiner's Initials

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ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

ORBITO, LLC

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

The Articles of Organization for this Limited Liability Company were filed on JANUARY 03, 2011 and assigned  
Florida document number L10000041478

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ORBITO, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

8300 NW 53 RD STREET, STE 350 DORAL, FL 33166

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

8300 NW 53 RD STREET, STE 350 DORAL, FL 33166

(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:

LUIS NIETO

New Registered Office Address:

8300 NW 53RD STREET STE 350

(Enter Florida street address)

DORAL

(City)

Florida

33166

(Zip Code)

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 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby certify that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u>                                                              | <u>Type of Action</u>                                                      |
|--------------|-------------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------|
| MGR          | NIETO, LUIS | AV. LUIS ROCHE, EDIF. HUMBOLDT, PISO 7<br>ALTAMIRA, CARACAS VENEZUELA XX XX | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGR          | NIETO, LUIS | 3300 NW 53RD STREET STE 350<br>DORAL, FL 33166                              | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |             |                                                                             | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |                                                                             | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |                                                                             | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |             |                                                                             | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated JANUARY 03 2011

Signature of a member or authorized representative of a member  
LUIS NIETO

Typed or printed name of signer