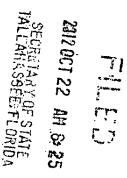
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J. SAULSBERRY EXAMINER OCT 23 2012

COVER LETTER

• 9

TO:

TO:	Registration S Division of Co				
SUBJE	ECT:	OR	BITO LLC		
		Name of Lim	ted Liability Company		_
The en	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.		
Please	return all corresp	ondence concerning this matter	to the following:		
		·	LUIS NIETO		_
			Name of Person		·
			ORBITO LLC		A . N
			Firm/Company		A
7750 NW 71 ST UNIT 101B				PIL BCT 22 AH 4 SEE	
			Address		<u></u>
			MIAMI FL 33166		FILOR PR
			City/State and Zip Code		RID.
		joh E-mail address: (nacuellar@hotmail.cor to be used for future annual rep	n ort notification)	
For fur	ther information	concerning this matter, please	call:		
	JOHA	NNA CUELLAR	at (_954_)	2141132	
	Name	of Person		Daytime Telephone Num	ber
Enclos	ed is a check for	the following amount:			
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	Certifi nclosed) Certif	Filing Fee, icate of Status & ied Copy ional copy is enclosed)
	Regis Divisi P.O. I	LING ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	Registration Division of Clifton Bui	Corporations	:

Tallahassee, FL 32301

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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 L	Liability Company)		O(1)
The Articles of Organization for this Limited Liability Company Florida document number <u>L120000041478</u> .	were filed on	FLORIDA	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company he	<u>re</u> :	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:	7750 NW 71	ST UNIT 101B	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI FLOR	RIDA 33166	
Enter new mailing address, if applicable:	7750 BW 71	ST UNIT 101B	
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI FLOR	RIDA 33166	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent: New Registered Office Address:	<u>e</u> :		
	E	nter Florida street add	ress
		, Florida	
	City		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 confirm 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:

<u>Title</u>	Name	Address	Type of Action
· · · · · · · · · · · · · · · · · · ·			Add Remove
	,		
			Remove
	 		Add Remove
			Add Remove
<u></u>			TD amazea
D. If amen	ding any other information, enter ch	nange(s) here: (Attach additional sheets, if n	necessary.)
_			SEGRETAR SALUAHASS
 Dated	OCTOBER 16	2012	2 AM & 25 2 OF STATE SEEL FLORIDA

Page 2 of 2

Filing Fee: \$25.00