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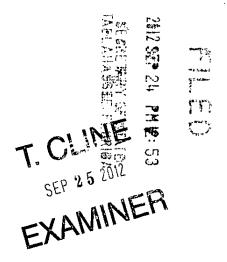
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COVER LETTER

TO:	Registration Sect Division of Corp	tion orations	مكلمه		p.	
SUBJE	CT: MSN TE	CH LLC				
			(Name of Lim	nited Liability Company)		
The enc	losed Articles of A	mendment a	and fee(s) are sub	omitted for filing.		
Please re	eturn all correspon	dence conce	rning this matter	to the following:		
		==				
		MARSHA	ASIHA	(Name of Person)		-
		INCFILE.	COM LLC			
				(Firm/Company)		-
		134 VINT	AGE PARK BL			-
				(Address)		
		HOUSTO	N, TX 77070	(City/State and Zip Code)		-
For firet	her information coi	ocerning this	e matter inleace o	vall.		
		icerning uni	s matter, prease c			
MARSHA SIHA (Name of Person)		at (281) 235-7533 (Area Code & Daytime Telephone Number)				
	d is a check for the	following a	imount:			v
\$25.	00 Filing Fee		Filing Fee & Scate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enc	Certific Certific (additio	ate of Status & Grand Copy and copy is enclosed)
	Registrat Division P.O. Box	NG ADDRE tion Section of Corporat (6327 see, FL 323	tions	Registration S Division of C Clifton Build	Corporations ing ve Center Circle	FLURIES CO

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

MSN TECH 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 09/06/2012 and assigned Florida document number L12000114314 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ORANGE PEEL TECHNOLOGIES, 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: (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 of the new registered agent and/or the new registered office address here: Name of New Registered Agent:

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

New Registered Office Address:

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.

(City)

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

(Enter Florida street address)

Florida

(Zip Code)

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

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if n	2 ST 24
			53
Dated SEPT	EMBER 17 , 2012	· · · · · · · · ·	
	Signature of a member	er or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00