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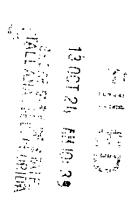
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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Camarin Nickel Online 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:

Richard Witcher

Name of Person

Camarin Nickel Online LLC

Firm/Company

3505 Lake Lynda Dr Suite 237

Address

Orlando, FL 32817

City/State and Zip Code

richard@blue.cr

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

For further information concerning this matter, please call:

Richard Witcher

Name of Person

_{31,407} 733-0770

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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Camarin Nickel Online I				
(<u>Name of the Limited</u> (A	Liability Company A Florida Limited Lia	as it now appears bility Company)	on our records.)	
The Articles of Organization for this Limited Life Florida document number <u>L13000145418</u>	iability Company v B	vere filed on 10/	15/2013	_ and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	f the limited liabil	ity company here	:	
N/A				
The new name must be distinguishable and end wit "L.L.C."	th the words "Limite	d Liability Compan	y," the designation "LLC	C" or the abbreviatio
Enter new principal offices address, if applic	able:	N/A		
(Principal office address MUST BE A STREE	ET ADDRESS)		/ (<u> </u>	
				ಡ
				3
Enter new mailing address, if applicable:		N/A	្តីត្រូវ • ម	2
(Mailing address MAY BE A POST OFFICE	BOX)		71 can	
			75 kg/s 5.55 (- 3	3 : ****
			<u> </u>	(A)
B. If amending the registered agent and/ registered agent and/or the new registered of			ır records, <u>enter the</u>	name of the new
Name of New Registered Agent:	Ingrid Flem	ing		
New Registered Office Address: 12472 Lake Underhill Rd Suite 444				
	Enter Florida street address			SS
	Orlando		, Florida <u>32</u> 8	28
		City		Zip Code
New Registered Agent's Signature, if changing I	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

Page 1 of 3

· 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 **Type of Action** Title -<u>Name</u> **Address** 3505 Lake Lynda Dr Richard Witcher MGR Suite 237 Remove Orlando, FL 32817 12472 Lake Underhill Rd **Ingrid Fleming** MGR Suite 444 Remove Orlando FL 32828 Remove Remove Remove Remove

 If amending any other information N/A 	n, enter change(s) here: (Attach additional sheets, if necessary.)
IN/A	
october 22	2013
	nd
-	ure of a member or authorized representative of a member
Richard Witcher	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00