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March 5, 2014

FLORIDA DEPARTMENT OF STATE **Division of Corporations**

ORION MEDICAL LLC 7900 NW 33 TH STREET SUITE 106 HOLLYWOOD, FL 33024US

SUBJECT: ORION MEDICAL LLC

REF: L14000012467

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be Effective January 1, 2014, all limited limited Liability Company Actsubmitted in accordance with the Revised Limited Liability Company Acts Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 50 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document in please call (850) 245-6051.

Tammi Cline
Regulatory Specialist II

Letter Number: 114A00004762

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ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION

(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 _ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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 name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 605 F.S. Or, if this document is being filed to merely reflect a change in the registered affice address, I be peby confirm that the limited liability company has been notified in writing of this change.

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If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager

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:

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