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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: ORBIS CAPITAL VENTURES, UC 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:
KERON HOWE Name of Person
PROPERTY NATION:
20855 NE 16 AVE # C13
MIAMI FC 33179 City/State and Zip Code
Shirkelae my property nation. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
SHIPKEEA POLLE at 786 520 3482 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee Certificate of Status Certified Copy (additional copy is enclosed) S25.00 Filing Fee 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

ORBIS CAPITAL VENTURES, U.C.

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

(A Florida Limited Liability Company)

idulity Company "the designation "LLC" of	or the abbreviation "L. F. C."	
20855 NE C13 MIAMILEL	16 AVE	
d office address on our records, here:	enter the name of the new	<u>-</u>
Enter Florida street address		
Enter Florida street address , Flori		
	20855 NE C13 MIAMI, FU	idbility Company," the designation "L.C." and the abbreviation "L.C." 20855 NE 16 AVE C 13 MIAMI, FL 331.79 I office address on our records, enter the name of the new

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 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M $AMBR = A$	lanager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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Filing Fee: \$25.00