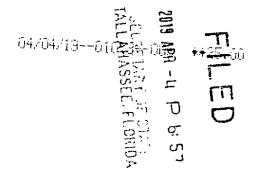
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## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Thegrity Communications, LLC (Name of Limited Liability Company)	<del></del>	
	₹. ~	
The enclosed Articles of Dissolution and fee(s) are submitted for filing.	ECAH LLAH	
Please return all correspondence concerning this matter to the following:	APR - u ve bak r vHASSE	
Amber Hagan Canno		
(Naude of Person)		
Integrity Communications, LIC	——————————————————————————————————————	
17649 Lake Port Orive (Address)		
Greenwell Springs <u>LA 70737</u> (City/State and Zip Code)	<u>_</u>	
For further information concerning this matter, please call:		
Ansber Hogan co.sp at (901) 679-3 (Name of Person) (Area Code & Daytime Telep	534 Shone Number)	
Enclosed is a check for the following amount:		
\$25.00 Filing Fee and Certificate of Dissolution  \$\sqrt{9}\$ \$25.00 Filing Fee, Certificate of Certified Copy (additional copy		
MAILING ADDRESS: STREET/COURIE	R ADDRESS:	
Registration Section Registration Section	Registration Section	
Division of Corporations Division of Corporat P.O. Box 6327 Clifton Building	Division of Corporations Clifton Building	
	2661 Executive Center Circle	

Tallahassee, FL 32301

## ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

The name of a limited liability company is	
_ Integrity Communications, 11C	·
2. The Articles of Organization were filed on <u>Jacquary 4, 2010</u> and assignment	gned
document number <u>L1000001024</u>	
3. The delayed effective date the dissolution if not effective on the date of filling:	received for filings
<ol> <li>A description of occurrence that resulted in the limited liability company's dissolution p 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).</li> </ol>	oursuant to section
Integrity Communications, LLC manager - Amber Abgra	or Carlo
relocated from FL to IA. Tritegrity Communications, LIC	De Torger
5. If there are no members, enter the name and address of the person appointed to wind up activities and affairs:	the company's
Amber Hogansemp	
17619 Lake Part Drive	
Greavell Springs, LA 70739	·
5. Signature of an authorized person or if there are no members, the signature of the person issed above to wind up the company's activities and affairs:	nappointed and
Inter Hageneamo Amber Hageneamo Printed Name	2

FILING FEE: \$25.00