Division of Corporations



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(((H23000174348 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HUY JACOB P.A. Account Number : I20210000156

Phone : (239)790-0123 Fax Number : (239)317-6070

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jeremydixon26@yahoo.com

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MAY 11 2023 T. LEMIEUX

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From: Suzanne Palumbo

Fax: 12393176070

To:

Fax: (850) 617-6383

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05/10/2023 11:01 AM

ARTICLES OF AMENDMENT TO (((H23000174348 3))) ARTICLES OF ORGANIZATION OF

	FL Integrity Investments, LLC	an our waranda)		_	
(A)	Liability Company as it now appears Florida Limited Liability Company)	on our records.)			
The Articles of Organization for this Limited Liabi	ility Company were filed on	May 6, 2021	an	d assign	ned
Florida document numberL21000213318	 `				
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of th	e limited liability company her	<u>.6</u> :			
The new name must be distinguishable and contain the words	s "Limited Liability Company," the de	signation "LLC" or the abb	reviatio	on "L.L.C	3. "
Enter new principal offices address, if applicabl	e:				
(Principal office address MUST BE A STREET A	ADDRESS)				
					
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BO		, ·			
		•	-	202	
	 			3	
B. If amending the registered agent and/or regis	stered office address on our re	cords, enter the name	of the	हर्ने १. १८५ १	egister
agent and/or the new registered office address h				ಲ	r
			•	<u>≪₹</u>	τ.
Name of New Registered Agent:			÷.	=	
			-,		
New Registered Office Address:	Enton Elovi	da street address			
	EART FIOTE	aa sii eel aaaress			
-	7	, Florida		. ,	
	City		Zip C	.ode	

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.

From:	Suzanne	Palumbo
-------	---------	---------

Fax: 12393176070

To:

Fax: (850) 617-6383

Page: 3 of 4

05/10/2023 11:01 AM

□ Change

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

(((H23000174348 3)))

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□∧dd
			Remove
			□Change
			🗆 Add
			Remove
			□Change
-			🗆 Add
			□ Remove
			🗆 Change
			🗆 Add
			Remove
			Change
			DAdd
			□Remove

To:

(((H23000174348 3)))

AR	TICLE IV.
Ma	nagement of Company. The company shall be a manager managed company and it shall have a single
ma	nager. The name and address of the initial manager is:
	Florida Catalyst Investments, LLC
,	1225 Manado Drive
	Naples, Florida 34113
_	•
neffecti <u>te:</u> If t	date, if other than the date of filing: (optional) ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 's effective date on the Department of State's records.
cord sp s filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
cd	MAY 10 2023
	O_{C}
	Signature of a member or authorized representative of a member