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SEGRETARY OF SEATO

C. LEWIS

MAY 5 2014

EXAMINER

COVER LETTER .

NAME OF CORPORATION: INTEGRITY Plus MERCHANT SERVICES IN C.

TO: Amendment Section Division of Corporations

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GALANIS	
Marine of Contuct Person	
Atlantic Slud & 505	
Springs Pl 33071	
eholmail com	
sed for future annual report notification)	
se call:	
at (315) 4794249 Area Code & Daytime Telephone Number	
payable to the Florida Department of State:	
☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)	
Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
I did Naturalization of my name My old Name	was Osia's luent
r F	Algorithms Slower Society State and Zip Code Show and Come annual report notification) e call: at 315 47994249 Area Code & Daytime Telephone Number ayable to the Florida Department of State: State Certified Copy Certificate of Status (Additional copy is enclosed) Street Address Amendment Section Division of Corporations Clifton Building

APPRUYED AND FILED

Articles of Amendment to Articles of Incorporation 50001170 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: TNTEGENTY SERVICES US INC. The new name must be distinguistrable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. Hamending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent

Page 1 of 4

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

New Registered Agent's Signature, if changing Registered Agent:

address of each Officer (Attach additional sheets, Please note the officer/di. P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted	and/or Director h , if necessary) rector title by the f President; T= Tre = Chief Financial ur, Director would I in the following n wes the corporatio	first letter of the office title: casurer; S= Secretary; D= Director; TR= T Officer. If an officer/director holds more to be PTD. nanner. Currently John Doe is listed as the on, Sally Smith is named the V and S. These SV as an Add.	rustee; C = Chairman or Clerk; CEO than one title, list the first letter of eac PST and Mike Jones is listed as the V.	= Chief ch office There is
X Remove	V Mike Jo	ones		
X Add	SV Sally Si	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>	Name	Address	1 0/ 1 / 795
1) Change	PI	Ruth Galauis	11225 WAH 20	Sic Blud # 303
Add Add		Ruth Galauis	Conof Springs	FC 33071
Remove		_		
2) Change	PT	Osicis Curum	S SAME	
Add				
Remove				
3) Change			- 	
Add				
Remove				
4) Change	<u></u>			
Add			<u> </u>	
Remove				
5) Change				•
Add				
Remove				

6) ____ Change ____ Add

_ Remove

	
/	
ndment provides for an exchange, reclassification is for implementing the amendment if not contain	or cancellation of issued shares,
et applicable, indicate N/A)	ey in the americanent usen.
	,

APPROVILL AND FILED

The date of each amendment(s) adoption: 4-15-2014 date this document was signed.	if other than the 14 APR 25 PH 2: 12
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	SECRETARY OF STAME TALLAHASSEE, FLOSIDA
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary	
Roth Galaus (Typed or printed name of person signing)	
President.	
(Title of person signing)	