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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: INTEGRITY ROE	BLERO SERVICES CORP.	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	ANTONIO AGUSTIN ROB	LERO	
•		Name of Contact Person	1
		Firm/ Company	
		Address	
	21477 NW 40TH CIRCLE		
		City/ State and Zip Code	e
MIAN	MI GARDENS, FL 33055		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ANTONIO AGUSTIN	ROBLERO	772 at (361-3065
ANTONIO AGUSTIN ROBLERO at (772 361-3065 Name of Contact Person Area Code & Daytime Telephone No		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

INTEGRITY ROBLERO SERVICES CORP.

(Name of Corporation as currently in	<u>ed with the Florida Dept, of Stat</u>	<u>e</u>)
19000018185		
(Document Number of Co	rporation (if known)	
rsuant to the provisions of section 607.1006, Florida Statutes, this <i>Flor</i> Articles of Incorporation:	rida Profit Corporation adopts the	following amendment(
If amending name, enter the new name of the corporation:		
		T7
me must be distinguishable and contain the word "corporation," [orp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co" or "Co" or "Co" or "Co" or the abbreviation "P.A".	A professional corporation nar	
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u>)	<u></u>	
-		
Enter new mailing address, if applicable:	**************************************	1
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		= 11
- -		5
If amending 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:		ر. دن
Name of New Registered Agent		
		
(Florida street e	(ddress)	
New Registered Office Address: (Cit	Florida	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: \underline{X} Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	INAEL ROBLERO LOPEZ	21477 NW 40TH CIRCLE
X Add			MIAMI GARDENS, FL 33055
Remove			
2) X Change	VP	ANTONIO AGUSTIN ROBLERO	21477 NW 40TH CIRCLE
Add			MIAMI GARDENS, FL 33055
Remove			
3) Change	<u>s</u>	ROSENDO B SALES SALES	21477 NW 40TH CIRCLE
Add			MIAMI GARDENS, FL 33055
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			·
Remove			
6) Change	<u></u>		
Add			
Remove			

	<i>heets, if necessary).</i> e to include a new pr	(Be specific) resident in the coroo	oration Mr INAU	L ROBLERO LOPE	7
				——————————————————————————————————————	
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	 -				
If an amendment pa	rovides for an exch	<u>ange, reclassificati</u>	on, or cancellatio	n of issued shares,	
tif not applicat	lementing the amer ble, indicate N/A)	idment if not conta	ained in the amen	dment itself:	
(і) ног црупсия	it, ballene maj				
		-	- .	· · · · · ·	
			_		

	07-24-2019	
The date of each amendment(s) :	doption:	if other than the
date this document was signed.		
	24/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date apartment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(ufficient for approval.	s)
The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following statems reach voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
, -, -, -, -, -, -, -, -, -, -, -, -, -,	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholde	er
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
07/24/201 Dated	9	
Signature S		
selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	1
	ANTONIO AGUSTIN ROBLERO	
	(Typed or printed name of person signing)	
	PRESIDENT.	
	(Title of person signing)	