

LD5000111034

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

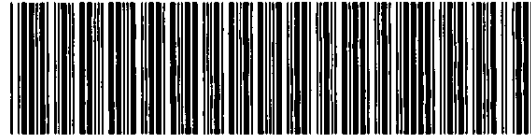
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100253552141

11/12/13--01011--026 **25.00

FILED
2013 NOV 27 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan NOV 27 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: An Integrity Pest Control Service LLC
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:

David E. MacPherson

Name of Person

An Integrity Pest Control Service

Firm/Company

9645 45th St. N.

Address

Pinellas Park, Fl 33782

City/State and Zip Code

ardelmac@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David E. MacPherson

Name of Person

at (727) 631-5301

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 13, 2013

DAVID E. MACPHERSON
9645 45TH ST. N.
PINELLAS PARK, FL 33782

SUBJECT: AN INTEGRITY PEST CONTROL SERVICE, LLC
Ref. Number: L05000111034

We have received your document for AN INTEGRITY PEST CONTROL SERVICE, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" beside the name and address of each managing member and/or the letters "MGR" beside the name and address of each manager listed in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 913A00026331

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

An Integrity Pest Control Service LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/16/2005 and assigned
Florida document number L05000111034.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

Florida

City

Zip Code

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

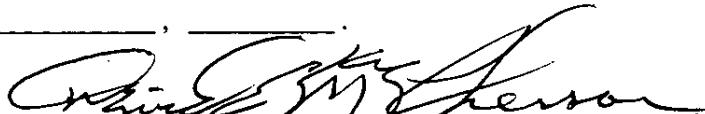
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
GM	Rober A Desantis	873 West Bay Dr Ste 162	<input type="checkbox"/> Add
		Largo, Fl 33770	<input checked="" type="checkbox"/> Remove
GM	David E MacPherson	9645 45th St N	<input checked="" type="checkbox"/> Add
		Pinellas Park, Fl 33782	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____,


Signature of a member or authorized representative of a member

David E MacPherson

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00