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EXAMINER

2010 APR -7 PM 2: 58
SECRETARY OF STATE
AND ANASSEE, FLORID



Division of Corporations

March 10, 2010

LEE SCOTT 1824 CHATHAM VILLAGE DR FLEMING ISLAND, FL 32003

SUBJECT: INTEGRITY TOURS AND COMPUTING, LLC

Ref. Number: L08000111371

We have received your document for INTEGRITY TOURS AND COMPUTING, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 310A00005933

2010 APR -7 PH 2: 5

1 PR -7 PM 2:5

COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Integrity Tours and Computing, LLC Name of Limited Liability Company			
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
LEE D. Scott Name of Person			
THTEBRITY TOXES AND COMPUTING, LLC			
1824 Chatham Village Dr. Address			
Fleming Island, FL 32003 City/State and Zip Code			
Lee Scott @ be U south. net 13-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Name of Person at (904) 504 \$756 PM B Area Code & Daytime Telephone Number B B			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:			
\$25 Filing Fee & Certified Copy			
INHSIB (5/08) PREVIOUSLY MAILED NOT RETURNED			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	_
1. Name of the limited liability company: Interes	RITY Towns AND Computing, LLC
2. (a) Principal office address of limited liability compar	ny:
(Note: MUST BE STREET ADDRESS)	1824 Chatham Village De Fleming Island, Fl 32883
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	
12-12-2008	LO8900 111371
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	UNITED STATES CORPORATION, INC
Registered Office Address:	TAMPA FL 33612 US
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Agent</u> : <u>NEW Registered Office Address:</u> (MUST BE FLORIDA STREET ADDRESS)	LEE D. SCO JETT
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the registered office ntical. Or, in the case of a Florida mitted so s) was/were authorized by an affirmative vote crwise provided in the articles of organization
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand Familiar with and accept the obligations of my pand Familiar with and accept the obligations of my panders, I hereby confirm that the limited liability company of Registered Agent	agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in terely reflect a change in the registered office ny has been notified in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00