## 111000004828

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## **COVER LETTER**

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SUBJECT:	INTEGRIT	Y ENTERPRISE of ORLAND	00, LLC					
Name of Limited Liability Company								
The enclose	d Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return	n all correspo	ndence concerning this matter	to the following:					
		THERON EDGE						
			Name of Person					
		INTEGRITY ENTERPRIS	SE of ORLANDO, LLC					
		<del> </del>	Firm/Company	<del>, , , , , , , , , , , , , , , , , , , </del>				
		301 E. OAK RIDGE RD						
			Address	A				
		ORLANDO FLORI	DA 32809					
			City/State and Zip Code	<del>4, ,, , , , , , , , , , , , , , , , , ,</del>				
		tjedge@gmail.com						
		E-mail address: (	to be used for future annual report notif	cation)				
For further i	nformation c	oncerning this matter, please ca	all:					
THERON E	EDGE		321 303-5439 at ( )					
	Name o	f Person	Area Code Daytime	Telephone Number				
Enclosed is	a check for th	ne following amount:						
<b>=</b> \$25.00 l	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 Taliahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

INTEGRITY ENTERPRISE of ORLANDO, 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 01/12/2016 and assigned Florida document number L1100004828 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." **@**> Enter new principal offices address, if applicable: 8 (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

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	DONALD L. DUNN	301 E. OAK RIDGE RD	■ Add
		ORLANDO, FL 32809	☐ Remove
			☐ Change
			☐ Add
			□ Remove
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		date but not :	an effective time	e, at 12:01 a.	m. on the e	arlier (
record specifies a o The 90th day after t	delayed effective the record is filed	,				
The 90th day after t	delayed effective the record is filed	•				<u> </u>
The 90th day after t	delayed effective the record is filed	2016				
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