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16 JUL 27 PH 3: 56 SECRETARY OF STATE

J. HARRIS

COVER LETTER

TO: Registration Division of	n Section Corporations	1 N	
SUBJECT:	Integrity Gol Name of Li	+ Company LLC	
	of Amendment and fee(s) are su	-	
Please return all corre	spondence concerning this matte	er to the following:	
	Eugene	J Garrote Name of Person	
	Integrity	Golf Company,	LLC
	14900	E Orange Lake R	Slud #397
	Kissimm	ee Fl 34747 City/State and Zip Code	
	QQQCCO JE-mail address:	te Dintegrity golf (to be used for future annual report noti	fication)
For further information	concerning this matter, please of	all:	
Marisa	Izzo	at (40) 378- Area Code Daytim	4653 x 4504
Name	of Person	Area Code Daytim	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	U	I,		
Integrity (Name of the Limited L		ompany	1	
(A F	lorida Limited L	iability Company)	rs on our records.	
The Articles of Organization for this Limited Liabilification of the Liabilification of	ity Company (were filed on	5105 50 100	and assigned
This amendment is submitted to amend the followin	g:			
A. If amending name, enter the new name of the	limited liabil	ity company he	ere:	
The new name must be distinguishable and contain the words	'Limited Liabilit	y Company," the de	esignation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicables		Integrit	y Golf Com Orange Lak	pany, LLC e Blud #397
		Kissimmer	p, F1 3474	7
Enter new mailing address, if applicable:		Integrity		iny, LLC
(Mailing address MAY BE A POST OFFICE BOX)	!	14900 E Kissimm	ee FI 34	747
B. If amending the registered agent and/or re registered agent and/or the new registered office a	~	ce address on	our records, <u>ent</u>	er the name of the new
Name of New Registered Agent:				
New Registered Office Address:	4900	E Orange	Lake Blue	1 # 397
	V		la street address	3117117
	<u>Kissim</u>	imee City	, Florida _	29 9 Zip Code
New Registered Agent's Signature, if changing Registe	red Agent:	City		Zip Code
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the register company has been notified in writing of this change	nt and agree I complete pe agent as pro cred office ad	rformance of m vided for in Ch	y duties, and I am apter 605, F.S. O	familiär with and Fif this document is

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>	Name	Address	Type of Action
mgcm	62 Companies, LLC	Change address to:	□ Add
		14900 E Orange Lake Blud #397	□ Remove
		Kissimmee, F1 34747	Change
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Filing Fee: \$25.00