# L13000059638

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### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Integrity Golf Company, 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:
Eugene Garrote Name of Person
Integrity Golf Company, LLC
14900 E Orange Lake Blud #397
City/State and Zip Code  QUARTOTE D INTEGRITY 901 CO. COM  JE-mail address: (to be used for future) annual report notification)
JE-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Marisa IZZO at (407) 378-4653 × 4504  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\times \text{Certificate of Status}\$\$ Certificate of Status \$\times \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$\$ Certified Copy \\ \text{(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

Integrity bolt	Company,	
(Name of the Limited Liability (A Florida Li	Company as it now apple mited Liability Company)	ars on our records.)
The Articles of Organization for this Limited Liability Con Florida document number <u>L13000059638</u>	npany were filed on _ )	04 34  3013 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	d liability company l	<u>here</u> :
The new name must be distinguishable and contain the words "Limited	d 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 ADDRE.	<u>SS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or register registered agent and/or the new registered office address		on our records, <u>enter the name of the ne</u>
Name of New Registered Agent:	<del></del>	
New Registered Office Address:		
	Enter F	lorida street address
	Cia	, 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 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.

If Changing Registered Agent, Signature of New Registered Agent

, etc. -

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 =	<b>Authorized Member</b>

<u>Title</u>	<u>Name</u>	Address	Type of Action
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		Kissimmer, F1 34747	Remove
			☐ Change
M <u>6RM</u>	Silo Golf, LLC	14900 E Orange Lake Blud#39	Add
		Kissimmer Fl 34747	☐ Remove
			Change
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Filing Fee: \$25.00