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COVER LETTER

Division of Corporations
SUBJECT: Integrity Legal Services Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Mary Barnett Name of Person
Integrity Legal Services
5036 Dr. Phillips Blud., Ste 266
Address
Orlando, FL 32819
City/State and Zip Code Integrity/egal services florida (gmail. Com E-mail/address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Many Barnett at (407) 502-0132 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee \$ \$155.00 Filing Fee \$ \$160.00 Filing Fee, Certificate of Status \$ Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

TO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:
Integrity Legal Services LLC (Must end-with the words "Limited Liability Company, "L.L.C.," or "LLC.")
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: 5036 Dr. Phillips Blud Ste 266 Orlando FL 32819	Mailing Address: 5036 Dr. Phillyps Blud Stc 266 Orlando, FC 32819
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Registernother business entity with an active Florida registration.)	

The name and the Florida street address of the registered agent are:

ARTICLE 1 - Name:

Mary Barnett

Name

8000 Bridgestone Drive

Florida street address (P.O. Box NOT acceptable)

Orlando FC 32835

City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating 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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	Mary Barnett
AMBR_	
	Orlando Pt 32835
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AMBR	Philip Dennington
	Orlando JFC 32835
	
 	
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