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COVER LETTER

TO: Registration So Division of Cor						
	Techni Group, LLC					
SUBJECT:	Name of Lin	nited Liability Company	*****			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Jeff Bach					
	· · · · · · · · · · · · · · · · · · ·	Name of Person				
	Integridad Techni Group	, LLC				
		Firm/Company	<u></u>			
	111 S. Oleander Avenue	е				
		Address				
	Sanford, FL 32771					
		City/State and Zip Code				
	jeff.bach@americanengir	•				
For further information c	e-mail address: t concerning this matter, please c	to be used for future annual report no all:	(theation)			
Kat Nuckols		941 284-5421				
Name o	of Person	Area Code Dayti	me Telephone Number			
Enclosed is a check for t	he following amount:					
S25.00 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		Street Address:	action			
Registration Section Division of Corporations		Registration Section Division of Corporations				
P.O. Box 632	27	The Centre of Tallahassee				
Tallahassee,	FL 32314	2415 N. Monr	oe Street, Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	any as it now appears on our records.) Liability Company) v were filed on 07/08/2016	
iability Company	v were filed on 07/08/2016	
,		and assigned
owing:		
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: Principal office address MUST BE A STREET ADDRESS! Enter new mailing address, if applicable: 111 S. Oleander Ave, Sanford, FL 32771		
words "Limited Liab	ility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		32771
Principal office address MUST BE A STREET ADDRESS)		
<u>BOX)</u>	111 S. Oleander Ave, Sanford, FL 3	
		7 3
registered office ss here:	address on our records, enter the	name of the new regist
Kathryn Nucko	ols	<u> </u>
718 Siesta Key		8: 0 o
Saracota		
		ia 34242 Zip Code
	words "Limited Liab cable: ET ADDRESS BOX) registered office as here: Kathryn Nucko	words "Limited Liability Company," the designation "LLC" or cable: 111 S. Oleander Ave, Sanford, FL.: 111 S. Oleander Ave, Sanford, FL.: 111 S. Oleander Ave, Sanford, FL.: BOX) registered office address on our records, enter the ss here: Kathryn Nuckols 718 Siesta Key Circle Enter Florida street address

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

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	Jeffrey Bach	111 S. Oleander Ave, Sanford, FL 32771	iii Add
			□Remove
			□Change
MGR	Marvin Keeling	111 S. Oleander Ave, Sanford, FL 32771	
			□Remove
			□ Change
AMBR	Carl Pierce		
		2640 CURRY RD, RISON, AR 71665	Remove
			□Change
			🗀 Add
			□Remove
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effective date is li e: If the date in	other than the disted, the date must be serted in this blocked date on the Dep	e specific and k does not m	cannot be princet the appl	icable statuto	ng or more than ry filing requir	(option: 90 days after fil- rements, this d	ing.) Pursuant to 6	05.020 isted (
cord specifies a	delayed effective o	late, but not	an effective	time, at 12:0	l a.m. on the e	arlier of: (b)	The 90th day af	ter th
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Filing Fee: \$25.00