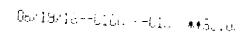
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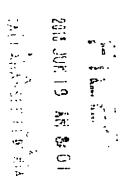
(Decuesary Name)
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(Document Number)
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COVER LETTER

	distration Section of Corp		•			
SUBJECT:	Integridad S	Solutions. LLC				
SOBJECT.		Name of Lim	ited Liability Company			
The enclose	d Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	ndence concerning this matter	to the following:			
		Peter J. Flaherty				
			Name of Person			
		Integridad Solutions, LLC				
Firm/Company						
	111 Second Avenue NE, Suite 1404					
Address						
		St Petersburg, FL 33701				
			City/State and Zip Code			
		blit@carrlawgroup.com	to be used for future annual report notif			
For further i	nformation co	oncerning this matter, please ca		ication)		
Brian Lit, E	sq.		727 894 7000			
	Name of	Person	at ()	: Telephone Number		
Enclosed is:	a check for th	e following amount:				
\$25.00 1	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
Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Integridad Solutions, LLC			
(Name of the Limited Liability C (A Florida Lin	Company as it now appears on our records.) mited Liability Company)		
he Articles of Organization for this Limited Liability Com	pany were filed on May 29, 2018	and assigned	
lorida document number L18000132676			
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited	l liability company here:		
ne new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or	the abbreviation "L.L.C."	
nter new principal offices address, if applicable:	 		
rincipal office address MUST BE A STREET ADDRES	53)	- <u>- N</u>	
		<u> </u>	
		ا ج	
nter new mailing address, if applicable:			
failing address MAY BE A POST OFFICE BOX)		74 sec. 20 1	
		28: 1	
		- 5 單	
. If amending the registered agent and/or registeregistered agent and/or the new registered office addres		nter the name of the	
Name of New Registered Agent:			
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	. 	
	Enter Florida street address		
	, Florid		
	Citv	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

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
P	Brian-David Lit	111 Second Avenue NE, #1404	
		St Petersburg, FL 33701	
			☐ Change
C00	Christopher D. Aying	111 Second Avenue NE, #1404	D Add
		St Petersburg, FL 33701	Remove
			Change
MGR ———	Peter J. Flaherty	111 Second Avenue NE, #1404	■ Add
		St Petersburg, FL 33701	Remove
		<u> </u>	Change
			D Add
			Remove
		-	☐ Change
			Remove
			☐ Change So
			□ Remove
			☐ Change

D, If amending any other i	nformation, enter	change(s) here: (Attach additional shee	ets, if necessary.,)	
						
		· · · · · · · · · · · · · · · · · · ·			·	
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E. Effective date, if other t (If an effective date is listed, th <u>Note:</u> If the date inserted document's effective date	e date must be specific a in this block does not	nd cannot be prior to d t meet the applicable	late of filing or more than 9 e statutory filing requires	(optional) 0 days after filing.) ments, this date w	Pursuant to 605.0 vill not be listed	0207 (3)(b) I as the
f the record specifies a b) The 90th day after			n effective time, at	12:01 a.m. o	n the earlier	r of:
Dated June 11		2018				
<u> </u>					2018 J	د يدي.) ،
		a member or authorize	ed representative of a mem	ber	4 0 H 19	Carrier .
Brian - David I		Typed or printed n	ame of signee			
					9 9 9	74 .
		Page 3	of 3			

Filing Fee: \$25.00