## 11900000 6109

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	<del></del>
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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2019 J. B. - 5 BM Pt 58

## **COVER LETTER**

TO: Registration S Division of Co			
SUBJECT:	tegrity Suppo	rt Grup LL ited Liability Company	_C
	`Amendment and fee(s) are sub ondence concerning this matter	-	
	CHRISTI,	AU RABURU Name of Person	
	INTEGRIT	1 SUPPORT GROUI Firm/Company	LLC
	1800 Pembruuh	Drive Suite 300 Address	
	Oclando, FL	3 2 810 City/State and Zip Code Gun Quma, 1. con to be used for findre annual report no	~
For further information	E-mail address: (concerning this matter, please concerning this matter)		tification)
	PHBVRV/ of Person	at ( <u>407</u> ) <u>457</u> Area Code Dayti	8265 me Telephone Number
Enclosed is a check for t	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)
MAIL	ING ADDRESS:	STREET/COU	RIER ADDRESS:

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

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Theyrity</u>	γωρθουσουσουσουσουσουσουσουσουσουσουσουσουσο	2019 J. 19 PM	<u>4: 20</u>
(Name of the Diffit	(A Florida Limited I	ny as it now appears on our records.) .iability Company)	
The Articles of Organization for this Limited I	iability Company	were filed on/\sum_3\19	. i. and assigned
Florida document number <u>L19000</u>	00 6109		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabil	ity Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	III North Ora	nge Au
(Principal office address MUST BE A STREE	ET ADDRESS)	50, to 834 Orlabo FC	<del></del>
		Orlabo FC	<u> 328 61 </u>
Enter new mailing address, if applicable:			
<u>(Mailing address MAY BE A POST OFFICE</u>	<u>BOX)</u>		
B. If amending the registered agent and	or registered of	Tice address on our records, ent	er the name of the ne
registered agent and/or the new registered o			
N. C. D. C. LA	Cossi	a P. Holdswon	د باره
Name of New Registered Agent:		<b>,</b>	
New Registered Office Address:	111 NG	Enter Florida street address	5 vde 834
	$\delta$	<b>\_</b> .	21001

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.

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
AMBR	Gerald Holdsworth	cosside III North Drange	Lue of Add
		Suite 834, Orlando, FL 3	180 l □ Remove
			□ Change
			Add
			☐ Remove
			Change
			□ Remove
		<del></del>	Change
			Remove
	•		Change
			Remove
			Change
			🗆 Add
			□ Remove
			☐ Change

(If an e <u>Note</u>	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	July 3rd . 2019.
	Chille II
	signature of member or authorized representative of a member

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Filing Fee: \$25.00