# L19000114600

(Requ	estor's Name)	
(Addre	ess)	
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PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Na	me)
		···· <b>·</b>
(Docu	ment Number	)
Certified Copies	Certificate	es of Status
Special Instructions to Fil	ing Officer:	

Office Use Only



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05/10/13--01614-007 \*\*25.00

Amend

MAY 2 1 2019 I ALBRITTON

# **COVER LETTER**

TO:			·	
		EK LLC		
SOBJE	CI;	Name of Limi	ited Liability Company	
The enc	losed Articles of a	Amendment and fee(s) are sub	mitted for tiling.	ĺ
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		ALAN GREER		
			Name of Person	ļ
	Division of Corporations  INTEGRITEK LLC  JECT:  enclosed Articles of Amendment and forms are return all correspondence concerning ALAN GREET  INTEGRITEK  IS27 PETERS  GREEN COVI  CHRIS@ORAN  E-n  Further information concerning this mat RIS RAMAGE  Name of Person  osed is a check for the following amounts \$25.00 Filing Fee  \$30.00 Filing	INTEGRITEK LLC		
			Firm/Company	
		1527 PETERS CREEK RE	)	
			Address	
		GREEN COVE SPRINGS.	. FL 32043	
		CHRIS@ORANGEPARKC	City/State and Zip Code PA.COM	
		E-mail address: (	to be used for future annual report notif	ication)
For furt	ner information co	oncerning this matter, please co	all:	
CHRIS	RAMAGE		904 278-5566	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	e 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)

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

INTEGRITEK LLC		
(Name of the Limited Liabil (A Florid	ity Company as it now appears on our records. a Limited Liability Company)	)
The Articles of Organization for this Limited Liability C	Company were filed on 4/26/2019	and assigned
Florida document number L19000114600	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited 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 ADDI	RESS)	
		0
Enter new mailing address, if applicable:		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
•		
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add		enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	Flor	rida
<del></del>	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

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
MMBR	ALAN GREER - 51%	1527 PETERS CREEK RD	
		GREEN COVE SPRINGS, FL	
		32043	Remove
			Change
	MARK BAILEY - 49%	9130 MARGROVE CT	Change
MBR			
		OWINS, MD	
			□ Remove
		20736	
			Change
			□ Remove
		<u> </u>	Change
		<del></del>	Remove
			Change
			☐ Remove
			Change
			Add
			☐ Remove
			Change

Effective date, if other than the date of filing:    (optional)     If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing. Pursuant to 605 0207  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  The 90th day after the record is filed.  Dated   MAY 6TH   2019    Signsture of a member or authorized representative of a member			-		_	·		
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Dated				not an effec	ctive time, a	t 12:01 a.m	. on the earlie	r of:
	Dated MAY 6TH		2019					
Signature of a member or authorized representative of a member	Danca		- '	•				
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Page 3 of 3

Filing Fee: \$25.00