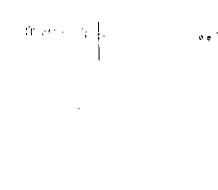
## 119000200723

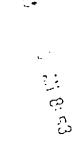
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





200333407772





Amendhiame

SEP 1 1 2019 I ALBRITTON

## **COVER LETTER**

TO:		istration Se ision of Cor			a		
CHDIE	cr.	Integrity H	ome Health Care Services I	LC			
SUBJE	.CT:		Name of Lim	ited Liability Company			
The enc	losed	Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please r	eturn	all correspo	ondence concerning this matter	to the following:			
			Tracy Joseph				
			<del></del>	Name of Person			
			Integrity Home Health C	are Services LLC			
				Firm/Company	<del>!</del>		
			6719 Southport Drive				
				Address	<del></del>		
			Boynton Beach FL, 33472				
			City/State and Zip Code				
			t.joseph@integrityhomehealthcares.com				
			E-mail address: (	to be used for future annual report notification)			
For furt	her in	formation c	oncerning this matter, please ca	all:			
Tracy .	Josep	ph		754 2188786			
		Name o	f Person	Area Code Daytime Telepho	one Number		
Enclose	d is a	check for th	ne following amount:				
<b>⑤</b> \$25	5.00 F	iling 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)		
			ING ADDRESS:	STREET/COURIER AD	DRESS:		
		Divisio	ation Section on of Corporations	Registration Section Division of Corporations			
		P.O. Be	ox 6327	Clifton Building			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20:4

integrity Home Health Care Services LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L19000200723	were filed on <u>08/07/2019</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
Integrity Home Care Plus LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1451 W. Cypress Creek Ste. 300	
(Principal office address MUST BE A STREET ADDRESS)	Ft.Lauderdale FL 33309	
(Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		enter the name of the I
Name of New Registered Agent:		
Nour Posistand Office Address		
New Registered Office Address:	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·
	. Florie	da
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		1
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office	ree to act in this capacity. I furth performance of my duties, and i provided for in Chapter 605, F.S	l'am familiar with and S. Or, if this documen

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being ad or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Detrich Lodge	6719 Southport Drive Boynton Beach FL 33472	<b>.</b> Add
			□ Remove
			Change
AMBR	Tiara Smith	1100 3rd Ave N. Nashville TN 37208	Add
			Remove
			□ Change
			Add
			□ Remove
		<del></del>	□ Change
			Add
			□ Remove
			☐ Change
		<del></del>	i Remove
			☐ Change
			□ Add
			Remove
			Change

	<del></del>
re.	08/06/2019
lf 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.
The	August 27th 2019
	August 27th  2019
The	August 27th 2019

Page 3 of 3

Filing Fee: \$25.00