

L200000 12105

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

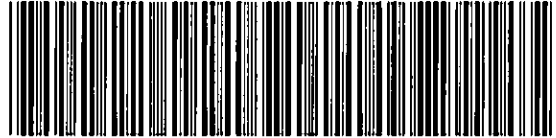
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/25/20--01023--006 **25.00

20 FEB 25 PM 2:54

FEB 18 2020
C. McMAUR

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AUDINTEGRAL SERVICES, LLC
Name of Limited Liability Company

20 FEB 25 PM 2:54

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ava L DORIGO
Name of Person
Audity
Firm/Company
8440 Harding Ave APT 8
Address
MIAMI BEACH Florida 33141
City/State and Zip Code
AudinTEGRALservices@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AVA L DORIGO at (786) 5578737
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

If Changing Registered Agent, Signature of New Registered Agent

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

Type of Action

☐ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

(This area is intentionally left blank for amendments. The content has been crossed out with large diagonal lines.)

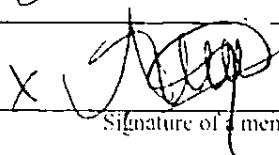
E. Effective date, if other than the date of filing: _____ (optional)

(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 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 2/18 2020

X 

Signature of a member or authorized representative of a member

Gina Lawrence Dougo

Typed or printed name of signee