421000103819

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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S. CHATHAM



COVER LETTER

TO: Registration Division of C	Section Corporations	•	•
ALLES 412 (122)	AR INTEGRITY LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	of Amendment and fee(s) are sub		
Please return all corre	spondence concerning this matter	to the following:	
	GLORIA M ZEVALLOS		
		Name of Person	
	BEST QUICK TAX RETU	JRNS INC	
		Firm/Company	
	320 S BUMBY AVE STE	10	
		Address	
	ORLANDO FL 32803		
		City/State and Zip Code	
	BQITR@MSN.COM	to be used for future annual report not	ification)
For further information	n concerning this matter, please c		nication)
GLORIA M ZEVALI	LOS	407 896-7921 at ()	
Nan	ne of Person		ne Telephone Number
Enclosed is a check for	or 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
<u>Mailing Add</u> Registratio		Street Address: Registration So	ection
Division o	f Corporations	Division of Co	rporations
P.O. Box 6 Tallahasse	5327 e, FL 32314	The Centre of 2415 N. Monro	Tallahassee De Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

STELLAR INTEGRITY LLC	ed Liability Company as it now appears on o	our records.)
(ed Liability Company as it now appears on o (A Florida Limited Liability Company)	, <u></u> ,
The Articles of Organization for this Limited L Florida document number L21000103819	ability Company were filed on 03/03/20	and assigned
This amendment is submitted to amend the following	owing:	
A. If amending name, enter the new name o	the limited liability company here:	
The new name must be distinguishable and contain the	ords "Limited Liability Company," the designa	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:	<u></u>
Principal office address MUST BE A STREI	T ADDRESS)	N B
		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE	address MAY BE A POST OFFICE BOX)	
		247
		7 7
B. If amending the registered agent and/or	Q	ds, enter the name of the new register
agent and/or the new registered office addre	ss here:	
Name of New Registered Agent:	ALVAREZ ASHLEY	
New Registered Office Address:	274 WILSHIRE BLVD STE 224	

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.

City

CASSELBERRY

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

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
MGR	ALVAREZ ASHLEY	274 WILSHIRE BLVD 224 CASSELBERRY FL 32	70 ≣ Add
			□Remove
			_ Change
MGR	ALVAREZ KELLY A	274 WILSHIRE BLVD 224 CASSELBERRY FL 32	70 □Adđ
			_ ≣Remove S
			Remove System Juliange Officer
-			9 Pre 3: 4
			_ Remove
			□Change
			🗀 Add
			□Remove
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ffective date, if other than an effective date is listed, the dat lote: If the date inserted in the ocument's effective date on t	e must be specific a tis block does no	nd cannot be prior to meet the applica	o date of filing or n ble statutory filin	ore than 90 days after g requirements, this	filing.) Pursuant to 605.020
record specifies a delayed eff I is filed.	ective date, but n	ot an effective tin	ne, at 12:01 a.m.	on the earlier of: (b) The 90th day after th
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	() ~	^			
		a member or author	yed representation	of a mambar	

Filing Fee: \$25.00