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## **COVER LETTER**

TO:

Tallahassee. FL 32314

SUBJECT:    S2 Integrity Consulting, LLC	
Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Kaitlin Seifert	
Name of Person	
S2 Integrity Consulting, LLC	
Firm/Company	
1243 Shipley Drive	
Address	
Niceville FL 32578	2
City/State and Zip Code	1 E
kaitlin@s2ic.com	
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	
Kaitlin Seifert 703 282-6148 705 at ( )	VI 10: 0
Name of Person Area Code Daytime Telephone Number Pro	<u> </u>
Enclosed is a check for the following amount:	
☐ \$25.00 Filing Fee	atus &
Mailing Address:  Registration Section  Street Address:  Registration Section	
Division of Corporations P.O. Box 6327  Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

S2 Integrity Consulting, LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our record Liability Company)	<u>ds.</u> )
Articles of Organization for this Limited Liability Company were filed on November, 2 2022 and ida document number 1.22000470906		
lorida document number 1222/A/47/0500		
his amendment is submitted to amend the following:		company here:  company here:  company here:  day Shipley Drive  ceville, FL 32578  day Shipley Drive  ceville, FL 32578  cevill
A. If amending name, enter the new name of the limited liab	nitted to amend the following:  enter the new name of the limited liability company here:  Inquishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Thices address, if applicable:  In MUST BE A STREET ADDRESS)  It ress, if applicable:  It re	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1243 Shipley Drive	
Principal office address MUST BE A STREET ADDRESS)	Niceville, FL 32578	20 <b>2</b>
		300 -F
	1942 Chiefou Deion	1 33
Inter new mailing address, if applicable:		0.00 F
Mailing address MAY BE A POST OFFICE BOX)	Nicevine, F1, 32376	<del> '</del>
	<del> </del>	
t. If amonding the registered agent and/or registered office.	addraeu an ann macarda, antar	• /
gent and/or the new registered office address here:	idaress on our records, <u>emer</u>	the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	SS
	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
AMBR	JASON SEIFERT	1243 SHIPLEY DRIVE	□Add
		NICEVILLE, FL 32578	□ Remove
			<b>=</b> Change
			□Add
			□Remove
			□Change
			2023 OCT - 6 Remove
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Jason Seifert is being changed fr	om Manager to Autho	rized Member.			
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ctive date, if other than the da effective date is listed, the date must be	te of filing:	ior to date of tiling or m		ional) er filing ) Pursuant to	605 02
If the date inserted in this block	does not meet the app	licable statutory filin			
iment's effective date on the Depa	itment of state's recor	us.			
ord specifies a delayed effective d	ate, but not an effective	e time, at 12:01 a.m.	on the earlier of: (	b) The 90th day a	after th
filed.					
OCTOBER 2	2023				
d	<del>,</del> ·	·			
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Typed or printed name of signee