P05000095342

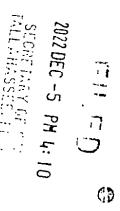
(R	equestor's Name)	
(A	ddress)	
(A	ddress)	· · ·
(C	ity/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)
(D	ocument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to	Filing Officer:	
J. HORNE		
FEB 2 3 2023		

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations
NAME OF CORPORATION: Integrity Construction & REMOVATIONS, INDOCUMENT NUMBER: P05000095342
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Integrity Construction + Renovations, Inc. Firm/Company 640 SF 1846 Street Address Ocala, FL 34471 City/State and Zip Code Becksmaintenanceservices Colomail.com E-mail address: (to be used for future annual report notification).)
or further information concerning this matter, please call:
LUCIO VOSQUEZ at 352,509-6866 Name of Contact Person Area Code & Daytime Telephone Number
aclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing Address Amendment Section Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Am	nendmen 2022
to Articles of Inco of	
(Name of Corporation as currently	filed with the Florida Dept. of State)
Integrity Construction (Document Number of	+ Renovations Inc.
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation: Second Corporation Corporation	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Craia, FL 34471
C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE ROY)	SAMIE AS AROVE

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent		
	(Florida erect address)	
New Registered Office Address:	/	, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: XChange	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
		i lo	
Remove Change	 /		
Add	Ì		
Remove	1		
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach <i>additiona</i>	dding additional Articles, enter change(s) here: I sheets, if necessary). (Be specific)	
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		·
an amendmen	t provides for an exchange, reclassification, or cancellation of issued shares,	
if not appli)	mplementing the amendment if not contained in the amendment itself: cable, indicate N/A)	
····		
		 -
	$\mathcal{N} \setminus \mathcal{M}$	

The date of each amendment(s) adoption:	, if other than the
date this document was signed. Effective date if applicable: 18/2022	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the incorporators, or board of directors without sharehol action was not required.	der action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amer by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by:	
(voting group)	
Signature (By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or officers have no selected fishering by that fishering has the fishering of the selection of the se	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President Divector	