P09000064397

(R	equestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phon	e #)
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FLORIDA DEPARTMENT OF STATE Division of Corporations

July 7, 2016

ANA MARIA BAGNUOLI INTEGRITY SERVICES INTERNATIONAL 2091 NW 190TH AVE. PEMBROKE PINES, FL 33029

SUBJECT: INTEGRITY SERVICES INTERNATIONAL CORP

Ref. Number: P09000064397

We have received your document for INTEGRITY SERVICES INTERNATIONAL.CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The incorrect form was submitted. Please complete Profit Articles of Amendment for filing.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 016A00014247

To Mark The Control of the Control o

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: INTOCKET	SELVICES INTERNATIONAL
DOCUMENT NUMBER: P090000	64397
The enclosed Articles of Amendment and fee are subm	itted for filing.
Please return all correspondence concerning this matter	to the following:
1	A BAGNUOU Name of Contact Person PUICES INTERNATIONAL
	Firm/ Company
2091 NW 190	OTH AVE Address
PEMBLOKE P	NES, FL 33029
INFO P. MYINTEG	for future annual report notification)
ANA MARIA BAGNUOLI	at (305) 761-8795 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pay	vable to the Florida Department of State:
Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy
PAID	is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

(Name of Corporation as currently filed with the Florida Dept. of State) P 0900064397 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."	Ý., **	INTEGRITY SERVICES INTERNATIONAL CORP.
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) t its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	·20	
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2001 NUT 100 -1 ALE		ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the
(Principal office address MUST BE A STREET ADDRESS) PEMBROKE PINES, FL		PEMBROKE PINES, FL
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) TOGI NW 190TH AVE PEMBLOKE PINES, EL 33.029		Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) PEMBLOKE PINES, EL
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:		. 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 ANA MARIA BAGNUOLI		Name of New Registered Agent ANA MARIA BAGNUOLI
2091 NW 190TH AYE. PEMBROKE PINES (Florida street address)	, FL	2091 NW 190TH AYE. PEMBROKE PINE (Florida street address)
New Registered Office Address: PENBLOKE PINES , Florida 33079 (City) (Zip Code)		New Registered Office Address: PENBLOKE, PINES , Florida 33029 (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

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 <math>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: X Change	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	<u>ones</u>	
X Add	SV Sally S	<u>emith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) K Change	President	RICARDO A. BAGNUOLI	2091 NW 190TH AVE
Add	(P)		pembroke fines
Remove			FL, 33029
2) 🔀 Change	VP and	Ana MARÍA BAGNUOLI	2091 NW 190TH AVE
Add	Secretary		Pembroke Pines, FL
Remove	•		33029
3) Change	•		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u></u>	
Add			
Remove			
6) Change			
Add			
Damova			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
f an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(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, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 7/20/2016 Signature 4000000000000000000000000000000000000	
Signature Signature Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Vice PRESIDET	
(Title of person signing)	