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SECRETARY OF STATE
DIVISION OF CORPORATIONS

C. Levi SH

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Integrity	Services Corporation of Florida			
DOCUMENT NUMBER: P1400008				
The enclosed Articles of Amendment and fee				
Please return all correspondence concerning th	is matter to the following:			
Robert Whitm	an			
<del> </del>	Name of Contact Person			
Integrity Servi	ces Corporation of Florida			
Firm/ Company				
1555 Glenhav	ren Circle			
<del></del>	Address			
Ocoee, FL 34	761			
<del></del>	City/ State and Zip Code			
cinwhit5@hotmai E-mail address: (to	be used for future annual report notification)			
For further information concerning this matter,	please call:			
Robert Whitman	at (407 ) 448-4365			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount r	nade payable to the Florida Department of State:			
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta				
Mailing Address  Amendment Section  Division of Corporations  P.O. Box 6327  Tallabasses, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as current)	y filed with the Florida Dept. o	1 State) 14 00 30	
Intergrity Services Corporation	of Florida $\mathcal{P}/$	1 State) 40000 8318	$\mathcal{I}$
(Document Number	of Corporation (if known)	·	-
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this <i>Florida Profit</i>	Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the	corporation:		
Jobs Done Better Services SPE			The new
name must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A profe	," or "incorporated" or the al ssional corporation name must o	bbreviation contain the
B. <u>Enter new principal office address, if applica</u> (Principal office address <u>MUST BE A STREET A</u>			-
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE)	<u></u>		•
D. If amending the registered agent and/or registered new registered agent and/or the new register  Name of New Registered Agent		, enter the name of the	•
	(Florida street address)		
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing F		ada aktimatan afala mada	
I hereby accept the appointment as registered agen	i. 1 am jamiliar with and accept	tine 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	<u>PT</u>	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			<del> </del>
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			W
5) Change	<del></del>		
Add			<del> </del>
Remove			
6) Change			
	<del></del>		
Add			
Remove			

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	AN		<del></del>
ze, reclassificatio	n, or cancellatio	n of issued shar	es.
nent if not contai	ned in the amen	dment itself:	
	<del></del>		
·			
	v., 444 1		<del></del>
			•
	ge, reclassification ment if not contain	ge, reclassification, or cancellation ment if not contained in the amen	ege, reclassification, or cancellation of issued sharment if not contained in the amendment itself:

The date of each amendment(s) add	option: 10/21/2014	FILEU	, if o	ther than the
date this document was signed.		SECIRLARY OF STATE DIVISION OF CORPORATIONS		
Effective date <u>if applicable</u> :	(no more than 90 a	lays after amendment file adte): 27	_	
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were adop by the shareholders was/were suff		umber of votes cast for the amendment(s)		
		h voting groups. The following statement e separately on the amendment(s):		
"The number of votes cast for	or the amendment(s) was/were s	ufficient for approval		
by		))		
	(voting group)			
action was not required.  The amendment(s) was/were adopaction was not required.  Dated 10-21-20  Signature		t shareholder action and shareholder		
(By a dir selected,	- •	- if directors or officers have not been ands of a receiver, trustee, or other court		
F	Robert Whitman			
_	(Typed or prin	ted name of person signing)	_	
 	President		14	SEC SEC
	(Title	of person signing)	4 OCT 30 剛  : 27 	ECRETARY OF STAFE