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COVER LETTER

Division of Corporations	
NAME OF CORPORATION: I MARGINTY BuildErs of FI Corp	
DOCUMENT NUMBER: LICO 00103538	
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 Buildon of SI Corp. Firm/ Company	
1520 Killearn CTP Bolid	
Address	
City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	٦.
E-mail address: (to be used for future annual report notification)	٠.
For further information concerning this matter, please call:	
David Spiegel at (850)567-3283	
Name of Contact Person Area Code & Daytime Telephone Number	r
Enclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

Surgery I	63361,	1220	COFF	· ·	
(Name of Corporation as currently	y filed with the F				
1-10000	1524		0000	11581	
(Document Number	of Corporation (if known)	•		•
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this	Florida Profit C	Corporation ado	ots the following	amendment(s) to
A. If amending name, enter the new name of the	corporation:				
			<u> </u>		The new
name must be distinguishable and contain the vi "Corp.," "Inc.," or Co.," or the designation "Coword" chartered," "professional association," or the contact of the contact	orp," "Inc," or '	'Co". A profess	' or "incorpora ional corporati	sted" or the abli on name must co	breviation ontain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A					Cir Blud
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			·	,	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)	P. 0	o Bo	1 1216) 3 ₃
	• •	Tal	lahas	SEE, P	13231
					,
D. If amending the registered agent and/or registered agent and/or the new register	stered office add ed office addres	iress in Florida, s:	enter the name	of the	
Name of New Registered Agent			r	,	
		,			
	(Florida st	reet address)	 		
V 5	·	•	n		
New Registered Office Address:	(City		, Florida	(Zip Code)	•
•		,		(Lip code)	
		•	•		
New Registered Agent's Signature, if changing					
I hereby accept the appointment as registered ager	ıt. 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 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 Do	<u>e</u>					
X Remove	<u>v</u>	Mike Joi	nes				•	
X Add	<u>sv</u>	Sally Smith						
Type of Action (Check One)	Title		<u>Name</u>	,			<u>Addres</u> s	
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Add		,						
Remove								· · · · · · · · · · · · · · · · · · ·
2) Change		·					·	
Add					-			
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3) Change		_	····	· · · · · · · · · · · · · · · · · · ·				
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The date of each amendment(s) adoption: 4124117	, if other than the
date this document was signed.	
Effective date if applicable: 4134117	
(no more than 90 days after amendment file date)	
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 cast for the amendment(s) was/were sufficient for approval	
by	
(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 4/24/	
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)	·
Tresidemy	
(Title of person signing)	