P160000018909

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	INTEGR	ITY BUSINESS	CONSULT	TANT INC
DOCUMENT NUMBER:		P16000078909		
The enclosed Articles of Amendmen	at and fee are sui	bmitted for filing.		•
Please return all correspondence cor	cerning this mat	ter to the following	ıg:	
	D	ELIA JIMENEZ	FUNDOR.	A
		Name of Conta	act Person	
JIMENEZ ACCOUNTING OF WBP INC			INC	
Firm/ Company				
4180 PINE GLADES RD)
	Address			
	WEST PALM BEACH, FL 33406			
City/ State and Zip Code				
	ЛМЕ	ENEZ_TAX@HO	TMAIL.C	ОМ
E-mail a	ddress: (to be us	ed for future annu	ial report n	otification)
For further information concerning t	his matter, pleas	e call:		
DELIA JIMENEZ		at (561	471-4144 e & Daytime Telephone Number
Name of Contact Person		\	Area Cod	e & Daytime Telephone Number
Enclosed is a check for the following	g amount made p	payable to the Fior	rida Depar	tment of State:
	Filing Fee & cate of Status	□\$43.75 Filing Certified Cop (Additional co enclosed)	у	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy 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 to Articles of Incorporation of

INTEGRITY BUSINESS CONSULTANT INC

(Name of Corporation a	as currently filed with the Florida Dept. of State	<u>e</u>)
(Document	P16000078909 Number of Corporation (if known)	
·	•	
Pursuant to the provisions of section 607.1006, Florida Statis Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:	
INTEGRITY F	BUSINESS CONSULTING INC	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abb	'Inc," or "Co". A professional corporation nan	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	CSS)	
	•	产资
C. Enter new mailing address, if applicable:		3 1
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		-0
D. If amending the registered agent and/or registered of new registered agent and/or the new registered officers.		် ကိုက် ထိ
Name of New Registered Agent		
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	Planida	
New Registered Office Address.	, Florida_ (City)	(Zip Code)
Non-Book Associated the Control of t		
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am	red Agent: n familiar with and accept the obligations of the p	osition.
	, , , , , , , , , , , , , , , , , , , ,	•
Signatur	re 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	<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			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			<u></u>
Add			
Remove			
5) Change			
Add			
Remove			
Character Character			
6) Change			
Add			
Remove			

				
				<u></u>
				-
n amendment provides for an	exchange, reclassif	cation, or cancella	tion of issued shares,	ı
ovisions for implementing the (if not applicable, indicate No.	A)	ontained in the am	endment itself:	
			······································	

•	SEPTEMBER 26, 2016	
The date of each amendment(s) ado date this document was signed.		, if other than the
Effective date if applicable:	SEPTEMBER 26, 2016	
Effective date if applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Depart	ck does not meet the applicable statutory filing requirements, this date wartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
D	OCTOBER 19, 2016	
DatedSignature	Survell Contos	
(By a dire	ector, president or other officer - if directors or officers have not been	
	by an incorporator — if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)	
<u>_</u>	YUVIETH CORTES	
	(Typed or printed name of person signing)	
	PRESIDENT	
_	(Title of person signing)	