P17000039535

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: CLAIRE HART	, INC.	
DOCUMENT NUM	ABER: P17000039535		
The enclosed Article	s of Amendment and fee are:	submitted for filing.	
Please return all corn	espondence concerning this m	natter to the following:	
	JILLE BARTOLOME		
		Name of Contact Person	3n
	CLAIRE HART, INC.	, contact i cis	511
	•	Firm/ Company	
	8955 U.S. HWY 301 NORT		
		Address	
	PARRISH, FL 34219		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Coo	le .
IILL	E@LEADERSHIPUP.COM		
	E-mail address: (to be u	sed for future annual repor	notification)
For further information	on concerning this matter, plea		, ,
JILLE BARTOLOM		at (417-0690
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made		·
■ \$35 Filing Fee	<i>f</i>	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address	Street	Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CLAIRE HART, INC.	•	
(Name of Corporal P17000039535	tion as currently filed with the Florida Dept. of State)	
(Docu	ument Number of Corporation (if known)	<u> </u>
	da Statutes, this Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the c INTEGRITY NOTARY SERVICES, INC.	corporation:	
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	ord "corporation," "company," or "incorporated" or the abp." "Inc." or "Co". A professional corporation name must c e abbreviation "P.A."	_The new obreviation contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	DRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	2 <u>X</u>)	
D. If amending the registered agent and/or register new registered agent and/or the new registered	red office address in Florida, enter the name of the Office address:	9JUN21 AF
Name of New Registered Agent	<u> </u>	AH 10: 0
	(Florida street address)	7
New Registered Office Address:		
	(City) (Zip Co	odej
New Registered Agent's Signature, if changing Regineral hereby accept the appointment as registered agent.	tistered Agent: I am fumiliar with and accept the obligations of the position.	
Signa	ature of New Registered Agent, if changing	

(Attach additional shee Please note the officer/of P = President; V = Vice Executive Officer; CFO held President, Treasus Changes should be note a change, Mike Janes to Mike Jones, V as Remon Example:	is, if nece. director ti e Presider = Chief rer, Direc ed in the fi eaves the core.	tle by the first letter of the office title: nt; T= Treasurer; S= Secretary; D= Director; TR= Financial Officer If an officer/director bottle ways	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office
X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
£			
5) Change			
Add			
Remove			
6) Change			
Add	-		

_ Remove

	additional Articles, if necessary). (1	Be specific)			
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	des for an exchang	e, reclassification,	or cancellation o	issued shares.	
in amendment provide prisions for implement (if not applicable, in	<u>enting the ame</u> ndm	<u>tent if not containe</u>	d in the amendm	an men.	
<u>"OVISIONS for impleme</u>	<u>enting the ame</u> ndm	ent if not containe	d in the amendm	<u></u>	
<u>"OVISIONS for impleme</u>	<u>enting the ame</u> ndm	ent if not containe	d in the amendm		
<u>COVISIONS for impleme</u>	<u>enting the ame</u> ndm	ent if not containe	d in the amendm		
<u>COVISIONS for impleme</u>	<u>enting the ame</u> ndm	tent if not containe	d in the amendm	311 19801.	
an amendment provis rovisions for impleme (if not applicable, in	<u>enting the ame</u> ndm	tent if not containe	d in the amendm	311 1132-11-	

07/01/2019	
The date of each amendment(s) adoption:	, if other than t
date this document was signed.	
07/01/2019	
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 document's effective date on the Department of State's records.	will 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 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	
Signature & hell Pourtalance	
(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)	
JILI.E BARTOLOME	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	