## N14000006850

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
<u> </u>		<del></del>
Special Instructions to	Filing Officer:	
		İ
		İ





300336803203

0

11/12/19--01043--014 \*\*35.00

INDIANON IS DE STATE

Kiro . Il i Biologiogy

## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: The Sanctus Humanitas Foundation Inc.

Name of Corporation

DOCUMENT NUMBER: N14000006850

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Dana Simmons

Name of Contact Person

Magnum Media Management, Inc.

Firm/Company

480 Hibiscus Street, Suite 102

Address

West Palm Beach, FL 33401

City/State and Zip Code

dsimmons@magnummediamgmt.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dana Simmons

,561 (3

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**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

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of chan	ge is submitted for a corporation organized under the laws of the State of Florida  [State of State of Florida State of Flori
	to change its registered office or registered agent, or both, in the State of Florida.
1. The name of th	400 1 111 1
2. The principal o	
west Pain	n Beach, FL 33401
3. The mailing add	dress (if different): Same
4. Date of incorpo	pration/qualification: 7/22/14 Document number: N1400006850
5. The name and s Florida Departr	street address of the current registered agent and registered office on file with the nent of State: (If resigned, enter resigned)
5	Salvatore Renaldi, Jr.
3	301 Yamato Road, Ste 1240
<u> </u>	Boca Raton, FL 33431
6. The name and s (if changed):	treet address of the new registered agent (if changed) and /or registered office
9	Salvatore Renaldi, Jr.
4	80 Hibicus Street, Ste 102
V	Vest Palm Beach, FL 33401
_	of its registered office and the street address of the business of tice of its registered agent, identical.
Such change was authorized by the	authorized by resolution duly adopted by its board of directors or byen officer so board, or the corporation has been notified in writing of the change.
Signature o	of an officer or director Printed or typed name and title
I hereby accept th I further agree to performance of m agent. Or, if this aereby confign the	e appointment as registered agent and agree to act in this capacity. comply with the provisions of all statutes relative to the proper and complete y duties, and I am familiar with and accept the obligation of my position as registered document is being filed merely to reflect a change in the registered office address. I at the corporation has been notified in writing of this change.
Signati	November 4, 2019  Date  November 4, 2019
If signing on beha	If of an entity:
Salva Type	2 lonaldi Jr. d or Printed Name

\* \* \* FILING FEE: \$35.00 \* \* \*