## N2000000116

(Re	questor's Name)	
(Ad	dress)	<del></del>
<u> (Δd</u>	dress)	
(,,,	u1033)	
(Cit	y/State/Zip/Phone #)	
	_	
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)	
(30	Sinces Entity (value)	
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
	· · · · · · · · · · · · · · · · · · ·	
Special Instructions to	Filing Officer:	1
		į
·		

Office Use Only



100340363001

02/12/20--01606--021 \*+65.00

2020 FEB 12 AM 9: 52

Anund

MAR 0 7 2020 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	ON:	itatis Caritate, Inc		
DOCUMENT NUMBER:	N20000000716			
The enclosed Articles of Ar		nitted for filing.		
Please return all correspond	dence concerning this matte	er to the following:		
Craig Bachler				
		(Name of Contact P	erson)	·
		(Firm/ Company	y)	
PO Box 194				
·		(Address)		<del>-</del>
Thonosassa Florida 33592				
		(City/ State and Zip	Code)	
craig.bachler@kreweofeur	opa.com			
	E-mail address: (to be used	for future annual re	port notification	1)
For further information con	cerning this matter, please	call:		
Craig Bachler		at	941	773-0545
	(Name of Contact Person)			(Daytime Telephone Number)
Enclosed is a check for the	following amount made pa	yable to the Florida	Department of	State:
□ \$35 Filing Fce	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certiffed Copy (Additional copy enclosed)	Certif is Certif	O Filing Fee icate of Status ied Copy tional Copy is sed)
Mailing .		<u>St</u>	reet Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

FILED #9:52

Integritas Pietas Largitatis Caritate, Inc

(Name of Corporation as currently filed with the Florida I	Dept. of State)	
N20000000716		
(Document Numb	er of Corporation (if known)	-,,,
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopt	ts the following
A. If amending name, enter the new name of the corporat	<u>ion:</u>	
		The new
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Col	rp." or "Inc."
B. Enter new principal office address, if applicable:	10806 Main St #194	
(Principal office address MUST BE A STREET ADDRESS	Thonotosassa Florida 33592	
C. Enter new mailing address, if applicable:	PO Box 194	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	Thonotosassa Florida 33592	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a  Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City) , Florida, Cip Code	e)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am factorise the appointment as registered agent.		tion.
Si	gnature of New Registered Agent, if changing	<del></del>

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 X_Remove X_Add	<u>V</u> <u>Mik</u>	<u>i Doc</u> <u>e Jones</u> <u>y Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) × Change Add	<u>Pres</u>	Craig Bachler	PO Box 194 Thonotosassa Florida 33592
Remove 2) × Change Add	VP	Robb Russell	PO Box 194 Thonotosassa Florida 3359
Remove 3) × Change Add Remove	Tresurer	Valerie Casev	PO Box 194 Thonotosassa Florida 3359
4) × Change Add	Sec	Alexandra Peters	PO Box 194
Remove 5) Change Add Remove			Thonotosassa Florida 3359
6) Change Add			
E. If amending or ad (attach additional st	heets, if necessary		

	<del></del>
	<del></del>
· · · · · · · · · · · · · · · · · · ·	
	<del></del>
· · · · · · · · · · · · · · · · · · ·	
·	<del>-</del>
	<del></del>
	<del></del>
	<del></del> -
<del></del>	
Page 3 of 4	
1/21/2070	
The date of each amendment(s) adoption: 1/24/2020	_, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	

Dated	2/09/2020
Signature	
(	By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Craig Bachler
	(Typed or printed name of person signing)
	President
	(Title of person signing)

■ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were

. . .

adopted by the board of directors.