NZ0 000 000716

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zie/Dhone #)	
(City/State/Zip/Phone #)	
PICK-UP WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	s
Special Instructions to Filing Officer:	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 12, 2020

CRAIG BACHLER 1008 72ND ST. NW BRADENTON, FL 34209

SUBJECT: INTEGRITAS PIETAS LARGITATIS CARITATE INC

Ref. Number: N2000000716

We have received your document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 620A00020060

JEARLD H QUICK OPS

www.sunbiz.org

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of Florida er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Integritas Pietas Largitatis Caritate, Inc
	office address: 7901 4th St N Ste 300
St Petersburg Fl	
3. The mailing a	address (if different): PO Box 194 Thonosassa Fl
	poration/qualification: 8/28/2020 Document number: N20000000716
	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	Compton, Raeann
	10806 Main St #194
	Thunstages El 21502
6. The name and (if changed):	Thonotosassa FI 33592 d street address of the new registered agent (if changed) and /or registered office Bill Havre.
	Bill Havre.
	7901 4th St N Ste 300 P.O. Box NOT acceptable
	St Petersburg Fl 33702
The street address changed will	ess of its registered office and the street address of the business office of its registered agent be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
	Craig R Bachler
	Printed or typed name and title
hereby accept further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance td I am familiar with and accept the obligation of my position as registered agent. Or, if the ting filed merely to reflect a change in the registered office address. I hereby confirm that the tables been notified in writing of this change.
15/11	mature of Registered Agent ////6/20
	chalf of an entity:
Bill Harve	
Ty	yped or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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

CR2E045 (04/13)