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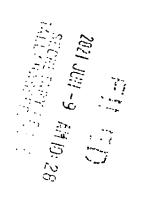
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COVER LETTER

TO: Amendment Section Division of Corporations

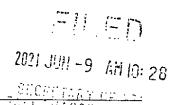
Integritas Pietas Largitatis Caritata Inc NAME OF CORPORATION:	
N20000000716 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Craig Bachler	
(Name of Contact Person)	
(Firm/ Company)	
1008 72nd St NW	
(Address)	
Bradenton Fl 34209	
(City/ State and Zip Code)	
krewcofeuropa@mail.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Craig Bachler 941-773-0545	
(Name of Contact Person) (Area Code) (Daytime Telephone Number)	_
Enclosed is a check for the following amount made payable to the Florida Department of State:	
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status (Additional Copy is Enclosed)	

Mailing Address
Amendment Section Division of Corporations P.O. Box 6327

Street Address

Amendment Section Division of Corporations The Centre of Tallahassee

Articles of Amendment to Articles of Incorporation of



Integritas Pietas Largitatis Caritate Inc

(Name of Corporation as currently filed with the Florid	a Dept. of State)
N20000000716	
(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation:	tutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	The new ration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	7901 4th St North
(Principal office address MUST BE A STREET ADDRES	Ste 300
	St Petersburh Fl 33702
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box 15327
	Palma Sola FI 34280
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	ffice address in Florida, enter the name of the
Name of New Registered Agent:	
New Registered Office Address:	(Florida street address)
	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept the obligations of the position.
	Signature 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 X Remove X Add	PT John De V Mike Jo SV Sally Sr	<u>nes</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	Sec	Robb Russel	PO Box 15327 Palma Sola Fl 34280
Remove			
2) <u>x</u> Change Add	<u>VP</u>	Karen Bachler	PO Box 15327 Palma Sola Fl 34280
Remove 3) Remove × Add Remove	2nd VP	Jefferson Bachler	PO Box 15327 Palma Sola Fl 34280
4) Change Add	<u>T</u>	Aundrea Bachler	PO Box 15327 Palma Sola FI
Remove			
5) Change Add	<u>s</u>	Alexandra Peters	PO Box 194 Thonosassa Fl 33592
x Remove			
6) Change Add			
Remove			
E. If amending or addin (attach additional shee		cles, enter change(s) here: (Be specific)	
Adding Robb Russel, Jeff	ferson Bachler, Au	indrea Bachler, removing Alexandra Peters fr	om board.
			
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	(/2/21				
The date of each amendment date this document was signed	(s) adoption:			, if other than	the
Effective date if applicable:	6/2/21				
	(no more than 9	0 days after amendm	ent file date)		
Note: If the date inserted in the document's effective date on the			ling requirements, this o	date will not be listed as the	
Adoption of Amendment(s)	(CHECK ON	<u>E</u>)			
The amendment(s) was/w was/were sufficient for ap	ere adopted by the members proval.	s and the number of v	rotes cast for the amend	iment(s)	

. .

Dated	6/2/21
Signati	The Crue
3 **	(By the chairman or vice chairman of the board, president or other officer-if director 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
	(T1
	(Typed or printed name of person signing)
	(Typed or printed name of person signing) President

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