P19000080160

(Red	questor's Name)				
(Add	dress)				
V					
(Add	dress)				
(City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL			
(Bus	siness Entity Nam	ne)			
(Dox	cument Number)				
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COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: The Bauen Group	
Name	of Corporation	
DOC	UMENT NUMBER: P19000080160	
The e	nclosed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please	e return all correspondence concerning this	s matter to the following:
Casey	Cane	
Name	of Contact Person	
The B	auen Group	
Firm/	Company	
3546 I	Deer Run S	
Addre	ess	
Palm I	Harbor, FL 34684	
City/S	State and Zip Code	
	ccane@bauenusa.com	
E-ma	il address: (to be used for future annua	I report notification)
For fu	arther information concerning this matter,	please call:
Casey	Cane	31 (727)3310054
	Name of Contact Person	at (727) 3310054 Area Code & Daytime Telephone Number
Enclo	sed is a \$35.00 check made payable to the	Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

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

statement of chai	nge is submitted for a	corporation organ	2, 607.1508, or 617.1508, Florida Statutes ized under the laws of the State of Florida cred agent, or both, in the State of Florida.			
	he corporation: The B	-	Ç ,			
2. The principal	office address: 33847	US Hwy 19 N, Palm	Harbor, FL			
3. The mailing a	ddress (if different): 4	195 Alt 19 #1031 Pal	lm Harbor, FL 34683			
4. Date of incorp	. Date of incorporation/qualification: 10/12/2019 Document number: P19000080160					
	street address of the timent of State: (If resi		gent and registered office on file with the			
	Braga , Jeovanni A					
	495 Alt 19 #1031PALM HARBOR, FL 34683					
			ALEE 	1020 AUG -7		
6. The name and (if changed):	street address of the	new registered ager	nt (if changed) and /or registered of light S	-7 AN		
	Casey Cane		ESTA FA	ق <i>ر</i>		
	3546 Deer Run S		L.H.	ဌာ		
		P.O. Box	NOT acceptable			
	Palm Harbor, FL 3468	34 				
The street addre	ss of its registered of be identical.	ffice and the street	address of the business office of its regist	ered agent.		
Such change wa authorized by th	is authorized by reson to board, or the corpo	lation duly adopted pration has been no	d by its board of directors or by an officer titled in writing of the change.	80		
10	of the		Casey Cane			
Signatur)		Printed or typed name and title			
I hereby accept I further agree to of my duties, and document is bein corporation has	the appointneent as r o comply with the pr d! am familiar with ng filed merely to yet heen notified in writ	registered agent an ovisions of all stat and accept the obl flect a change in th ting of this change.	d agree to act in this capacity. utes relative to the proper and complete p igation of my position as registered agent e registered office address, I hereby confi	performance Or, if this irm that the		
16		•	7/31/2020			
S-81	nature of Registered Agent		Date			
If signing on be	half of an entity:					
Ту	rped or Printed Name					

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