F20 000 002 147

(Re	questor's Name)	
(Ad	dress)	
	dress)	
(Au-	uiess)	
(Cit	y/State/Zip/Phon	e #)
	_	
PICK-UP	☐ WAIT	MAIL
— (Bus	siness Entity Nar	me)
(=		,
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Constitution of the		
Special Instructions to f	-iling Officer:	
		İ
		i

Office Use Only



300394561393

09/16/22--01014--008 **35.00

2022 SEP 16 PH 2: 00

DEC 1 A 7077 S. PRAT

. COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Synchrono Group, Inc.				
Name of Corporation				
DOCUMENT NUMBER: F20000002147				
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:				
Darrell Belch				
Name of Contact Person				
3H Corporate Services, LLC				
Firm/Company	-			
36 Long Alley				
Address				
Saratoga Springs, NY 12866				
City/State and Zip Code				
sosfilings@3hcs.com				
E-mail address: (to be used for future annual rep	ort notification)			
For further information concerning this matter, pleas	e call:			
Darrell Belch	at (518) 583-0639 Ext.125 Area Code & Davtime Telephone Number			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Dep	partment 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 cha	provisions of sections 607.0502, 617.0502, 60 nge is submitted for a corporation organized to to change its registered office or registered o	under the laws of the State of Delaward		_
1. The name of t	he corporation: Synchrono Group, Inc.			
2. The principal RALEIGH, NC 1	office address: 8521 SIX FORKS ROAD SUITI	F. 105		<u>-</u> -
3. The mailing a	ddress (if different):			_
4. Date of incorp	poration/qualification: 5 5 1020	Document number: <u>F2000000</u> 214]	
	street address of the current registered agent attended to the timent of State: (If resigned, enter resigned)	and registered office on file with the		
	CT CORPORATION SYSTEM		년 달	2027
	1200 SOUTH PINE ISLAND ROAD		:	2022 SLT
	PLANTATION, FL 33324		121	16
6. The name and (if changed):	street address of the new registered agent (if	changed) and /or registered office	E Fland	PH 2: 08
	3H Agent Services. Inc.		1-	æ
	1415 Panther Lane, Suite 327			
	P.O. Box NOT	acceptable		
	Naples, FL 34109			
	ess of its registered office and the street addressed be identical. It is authorized by resolution duly adopted by its board, or the corporation has been notified.			nt,
authorized by the				
	re of an officer or director	non Gildener, Secretary Printed or typed name and title		_
I hereby accept I further agree of my duties, an document is bei	the appointment as registered agent and agree comply with the provisions of all statutes is definition with the provisions of all statutes is defined the colligation of the merely to reflect a change in the register notified in writing of this change.	ear to get in this capacity	erformai Or, if t rm that t	nce his he
What of		9/13/2072 Date		
Sig	nature of Registered Agent	Date		_
If signing on be	half of an entity:			
Elizabeth Harker	. President			
T	yped or Printed Name			

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