

P000000063262

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

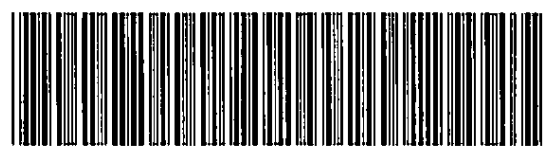
(Business Entity Name)

(Document Number)

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S T A T E

DEC 16

2020 NOV 16 PM 1:55

*OP-Resign*

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** SYNERGY CAPITAL PARTNERS, INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P00000063262  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Becky Haya :.  
\_\_\_\_\_  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

800 Cloughton Isld Dr. Apt 2404  
\_\_\_\_\_  
(Address)

Miami, Fl 33131  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Becky Haya Acevedo at ( 305 ) 794-5616  
\_\_\_\_\_  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

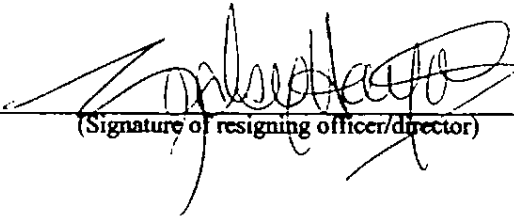
**Street Address:**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Becky Haya, hereby resign as officer/secretary  
(Title)

of SYNERGY CAPITAL PARTNERS, INC  
(Name of Corporation)

P00000063262, a corporation organized under the laws of the State of  
(Document Number, if known)  
FLORIDA

  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

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

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