I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

VP

SIGNATURE: NICKOLAS JARAMILLO

Electronic Signature of Signing Officer/Director Detail

2022 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P21000033241

Entity Name: SYNERGY AESTHETIC DENTAL CORPORATION

Current Principal Place of Business:

2301 N UNIVERSITY DR 209 PEMBROKE PINES, FL 33024

Current Mailing Address:

2301 N UNIVERSITY DR 209 PEMBROKE PINES, FL 33024

FEI Number: 86-3352296

Name and Address of Current Registered Agent:

JARAMILLO, NICKOLAS 10590 CITY CENTER BLVD BUILDING 7 APT 103 PEMBROKE PINES, FL 33025 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	P	Title	VP
Name	BOBADILLA, PATRICIA DDS	Name	JARAMILLO, NICKOLAS
Address	2301 N UNIVERSITY DR	Address	3351 SW 175 AVE
City-State-Zip:	PEMBROKE PINES FL 33024	City-State-Zip:	MIRAMAR FL 33029
Title	SEC	Title	TREA
Title Name	SEC JARAMILLO, GLADYS	Title Name	TREA JARAMILLO, SANTIAGO

Certificate of Status Desired: No

FILED Mar 16, 2022 Secretary of State 5338336752CC

> 03/16/2022 Date

Date