## 2015 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F12000002298

Entity Name: SYNDICATED SERVICES, INC.

**Current Principal Place of Business:** 

55 INLET HARBOR ROAD SUITE 223, BOX 8 PONCE INLET, FL 32127

**Current Mailing Address:** 

55 INLET HARBOR ROAD SUITE 223, BOX 8 PONCE INLET, FL 32127 US

FEI Number: 45-1345882 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BELL, TRACY 55 INLET HARBOR ROAD SUITE 223, BOX 8 PONCE INLET, FL 32127 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: TRACY BELL 10/23/2015

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRESIDENT, DIRECTOR Title SECRETARY, TREASURER

Name BELL, TRACY Name BELL, TRACY

Address 55 INLET HARBOR ROAD Address 55 INLET HARBOR ROAD

SUITE 223, BOX 8 SUITE 223, BOX 8

City-State-Zip: PONCE INLET FL 32127 City-State-Zip: PONCE INLET FL 32127

 Title
 VP, DIRECTOR
 Title
 CEO, DIRECTOR

 Name
 TAGLIA, JAMES
 Name
 BELL, DAVID

Address 625 SABAL LAKE DRIVE #107 Address 55 INLET HARBOR ROAD

City-State-Zip: LONGWOOD FL 32779

City-State-Zip: PONCE INLET FL 32127

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.

SIGNATURE: TRACY BELL PRESIDENT/DIRECTOR 10/23/2015

FILED Oct 23, 2015

**Secretary of State** 

CR0011351072