

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J DENNIS
JUN 2 0 2023

Office Use Only



700405518667

03/23/23--01021--012 **43.75

2023 MAR 29 PM 12: 10

FILED STATE
STORETARY OF STATE
STORETARY OF STATE

Synergetic Communications, Inc.

5450 NW Central Dr., Ste. 220 Houston, TX 77092

State of Florida
FL Reg Section Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

RE: Synergetic Communications, Inc. - F00000005681

To Whom It May Concern:

Enclosed you will find our completed Officer, Director Change Foreign Corporation application.

Please mail all correspondence to:

Michael Orlando Synergetic Communications, Inc. 5450 NW Central Dr., Ste. 220 Houston, TX 77092

If you have any questions regarding this application, please contact:

Michael Orlando Synergetic Communications, Inc. Phone: (713) 460-3114

Fax: (713) 460-2236

Email: morlando@sycomcorp.net

Enclosures

COVER LETTER

are

TO: Amendment Section Division of Corporations	
SUBJECT:Synergetic Communications,	ne.
30BJLC1	Name of Corporation
DOCUMENT NUMBER: F00000005	581
The enclosed Affidavit by Foreign Cosubmitted for filing.	orporation to Change/Add Officer(s) and/or Director(s) and fe
Please return all correspondence conc	erning this matter to the following:
Michael Orlando	
Name of Contact Pers	on
Synergetic Communications, Inc.	
Firm/Company	
5450 NW Central Dr., #220	
Address	
Houston, TX 77092	
City/State and Zip C	ode
license@syncomcorp.net	
E-mail address: (to be used for future	re annual report notification)
For further information concerning th	is matter, please call:
Michael Orlando	713 460-3114
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check made payable to	the Florida Department of State for the following amount:
□\$35.00 Filing Fee ■ \$43.75 Filing Certificate of \$	
Mailing Address: Amendment Section	Street Address: Amendment Section
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



FLORIDA DEPARTMENT OF STATE **DIVISION OF CORPORATIONS**

AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) AND/OR DIRECTOR(S)

2. This entity was authorized to transact number is F00000005681	business in Florida on 10/06/2000 and its Florida document
3. This corporation was formed under the	e laws of Texas
4. The name and address of each officer	
Title: President/Treasurer/Director	Name and Address Michael Orlando
	5450 NW Central Dr., #220
	Houston, TX 77092
CEO/Secretary	Gregory Nowicki
	5450 NW Central Dr., #220
	Houston, TX 77092
Director/CED	Phone Verifications, LLC
	4107 Mallory Ln, Suite 302 A
	Franklin, TN 37067
(Attach a	dditional pages if necessary)
ris Nielsen	Attorney-in-Fact
gnature of an officer or director	Title of person signing
ielsen	FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations*PO Box 6327*Tallahassee, FL 32314

CR2E127 (8/08)

Typed or printed name of person signing

Collectors Insurance Agency, Inc. Power of Attorney

NOTICE IS HEREBY GIVEN THAT Synergetic Communication, Inc., ("Entity") an entity organized use level laws of Texas, does hereby appoint, Angela Butera, Kris Nielsen, Kristina Warmka while employed by Collection	ınde
the laws of Texas, does hereby appoint, Angela Butera, Kris Nielsen, Kristina Warmka while employed by College Insurance Agency, Inc. as attorney-in-fact for the entity to act for the entity and affiliates and subsidiaries of the entity attack.	clors
hereto as Exhibit A, specifically organized herein by reference ("the Subsidiaries") in the Entities' and Subsidiaries' names fo limited purposes authorized herein.	ir the
The Entity and Subsidiaries, having taken all necessary steps to authorize the changes, hereby grants it's attorne fact the power to execute the documents necessary to file qualifications, certificates of authority, registrations, busing registrations, licenses, permits and forms of similar import on behalf of the Entity and Subsidiaries in any state, jurisdiction District of Columbia and Puerto Rico.	iness
This Power of Attorney expires when revoked by the Entity or Affiliates or Subsidiaries.	
IN WITNESS WHEREOF, the undersigned have executed this Power of Attorney on the 15th day of March, 2023	
MM,	
Signature of Authorized Entity Representative	
Michael Orlando, President/Treasurer/Directo	or
Print Name and Title	
Sworn to and subscribed before me,	

Notary Public, State of 1415
Commission Expires: 1 October 20, 202

