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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Syndicated Capit	tal Group Incorporated				
DOCUMENT NUM	LOGGOO TO	<u> </u>				
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.				
Please return all corr	espondence concerning this ma	tter to the following:				
	Lawrence Patrick OReilly					
		Name of Contact Person	1			
	Syndicated Capital Group Incorporate de					
		Firm/ Company				
	2604 N Crosswater Path					
	Address					
	Lecanto, FL 34461					
		City/ State and Zip Code	2			
	syncap1@yahoo.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	on concerning this matter, pleas	se call: 561	821-0209			
Name	of Contact Person	 '	de & Daytime Telephone Number			
Enclosed is a check to	or the following amount made	payable to the Florida Depa	irtment of State:			
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 lahassee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303			

Articles of Amendment to Articles of Incorporation of

Syndicated Capital Group, Incorporated
(Name of Corporation as currently filed with the Florida Dept, of State)
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
· · · · · · · · · · · · · · · · · · ·
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BON)
(Studing undress SIAT BE A FOST OF FICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent
(Florala street address)
New Registered Office Address: Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Signature of New Registered Agent, if changing
Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change PT John Doe X Remove $\underline{\mathbf{V}}$ Mike Jones \underline{X} Add <u>SV</u> Sally Smith Type of Action Title <u>Name</u> Address (Check One) Pauline Pearlman 2604 N Crosswater Path 1) ____ Change Lecanto, FL 34461 Add ____ Remove VP. Eileen Marie OReilly 2604 N Crosswater Path 2) ____ Change Lecanto, FL 34461 ____ Add Remove Lawrence Patrick OReilly, SR VΡ X _ Change 2604 N Crosswater Path ___ Add Lecanto, FL 34461 __ Remove 4) ____ Change ____ Add __ Remove 5) ____ Change ____ Add __ Remove 6) ____ Change Add Remove

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amending or ttach addition	dding additional Articles sheets, if necessary). (1	s, enter change(s) h Be specific)	ere:		
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			<u></u>		
					
an amandma	t provides for an exchang	in roclassification	or cancellation of is	senad charac	
provisions for	mplementing the amendr cable, indicate N/A)	nent if not containe	d in the amendmen	t itself:	
(if not appl	zable, indicate N/A)				
	·				
					

The date of each amendment(s) a late this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the D	clock does not meet the applicable statutory filing requirements, to epartment of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were si	opted by the shareholders. The number of votes cast for the amend ifficient for approval.	ment(s)
	proved by the shareholders through voting groups. The following seach voting group entitled to vote separately on the amendment(s)	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
3/19/202 Dated	4	
Signature	irector, president or other officer – if directors or officers have not	·
selecte	trector, president or other officer – it directors or officers have not divided, by an incorporator – if in the hands of a receiver, trustee, or othe field fiduciary by that fiduciary)	
	Lawrence Patrick O'Reilly	•
	(Typed or printed name of person signing)	
	Vice President	

(Title of person signing)