## L080000005928

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DIVISION OF CORPORATIONS

OB SEP 22 PM 2: 06

J. BRYAN

SEP 2 3 2008

EXAMINER

## **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

Tallahassee, FL 32314

SUBJECT:	Syner	gistic Group	5		
		ited Liability Company)	<del></del>		
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	Brian Bashara				
		(Name of Person)	<u> </u>		
	Synergistic Group				
		(Firm/Company)	27		
	4207 Bayclub Circle		S 80		
		(Address)	TO RE		
	Tampa, FL 33607		22		
	-	(City/State and Zip Code)	08 SEP 22 PH 2: 06		
For further information of	concerning this matter, please o	all:	: 06		
Brian Bashara		at ( 813 ) 775-8732			
(Name	of Person)	(Area Code & Daytime T	'elephone Number)		
Enclosed is a check for t	he following amount:				
<b>2</b> \$25.00 Filing Fee	☐\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certificate Copy (additional copy is enclosed)		
	ING ADDRESS:	STREET/COURIER	ADDRESS:		
Registration Section Division of Corporations		Registration Section Division of Corporations			
P.O. Box 6327		Clifton Building	<del></del>		

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Synergistic Group  (Name of the Limited Lie	hility Compa	ny as it now appears on ou	r records )			
(A Fic	orida Limited I	iability Company)	ii records.			
The Articles of Organization for this Limited Liability Company were filed on and assig and assig						
Florida document number L08000005928  This amendment is submitted to amend the following:						
						A. If amending name, enter the new name of the
The new name must be distinguishable and end with th "L.L.C."	e words "Limi	ted Liability Company," the	designation "	LLC" or the abbreviation		
Enter new principal offices address, if applicable:		4207 Baydub Cirde				
(Principal office address MUST BE A STREET ADDRESS)		Tampa, FL 33607				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4207 Baydub Circle Tampa, FL 33607				
B. If amending the registered agent and/or registered agent and/or the new registered office.  Name of New Registered Agent:		<u>e</u> :	ords, <u>enter</u>	the name of the new		
Name of New Registered Agent.						
New Registered Office Address:	New Registered Office Address: 4207 Bayclub Circle (Enter Florida street address)					
	T:	ampa	, Florida	33607		
-		(City)	1.101.1018	(Zip Code)		
New Registered Agent's Signature if changing Regi	stered Agent					

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Brian Bashara	4207 Baydub Circle Tampa, FL 33607	Add Remove
MGR	Leann Bashara	4207 Bayclub Circle Tampa, FL 33607	Add Remove
MGRM	Leann Bashara		Add Remove
MGR	DERRICK REIFF	12128 72nd Street Largo, FL 33773	_☑ Add _☐ Remove
			Add Remove
			Add Remove
D. If amen	nding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
			FILED STATE OF STATE OF CORPORATE OR SEP 22 PH 2:
Dated	AUGUST 31st	2008 Johang	STATE DRATIONS 2: 06
	Signature of a m	nember or authorized representative of a member  Leann Bashara	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00