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**EXAMINER** 



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04/06/09--01030--022 \*\*30.00

SECRETARY OF STATE

FILED

## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: SUPLEMENT LOGI	Stic Enterprise, UC ability Company)
Dear Sir or Madam:	
The enclosed Articles of Correction and fee(s) are submitted	for filing.
Please return all correspondence concerning this matter to th	e following:
Crica Brown (Name of Person)	
Synergy Logistic. Entery	vise,UC
P.O. BOX 880744	<del></del>
Port St. Jucil Fl. 3498 (City/State and Zip Code)	8
For further information concerning this matter, please call:	,
Srica Brown at (	77) 579873/ Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
□ \$25 Filing Fee	

CR2E062 (08/05)

## ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

Synergy logistic Enterprise UC.  SECOND: The articles of organization or the application to transact business  (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT  Contains an incorrect statement. The incorrect statement, the reason the statement is
Contains an incorrect statement. The incorrect statement, the reason the statement is
incorrect, and the corrected statement are as follows: The name of Company Should be - Synergy Solution Service Address Should be & f.D. Box 880746  Port Saint Lucie, fl. 34988 US
Please Add F81# 2104408604
OR
Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
Signature of a member or authorized representative of a member  Typed or printed name of signee  Filing Fee: \$25.00
CR2E062 (08/05)  Certified Copy: \$30.00 (optional)