

42000131455

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

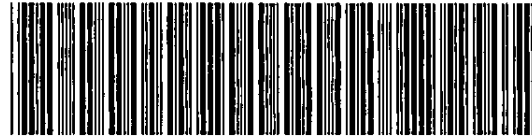
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300247564693

05/17/13--01024--007 \*\*25.00

FILED  
13 MAY 17 PM 4:36  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

MAY 20 2013  
D. BUTLER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: SYNERGY HOUSING DEVELOPMENT SERVICE, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ITORO ETUKS

Name of Person

Firm/Company

P O BOX 771840

Address

CORAL SPRINGS, FL. 33077

City/State and Zip Code

ietuks@gmail.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

ITORO ETUKS

Name of Person

at ( 786 ) 333-3017

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
13 MAY 17 PM 4:36  
TALLAHASSEE, FLORIDA

FILED  
13 MAY 17 PM 4:38  
FBI - TAMPA  
TAMPA, FLORIDA  
and assign

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

and assigned

Page 1 of 3

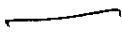
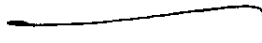
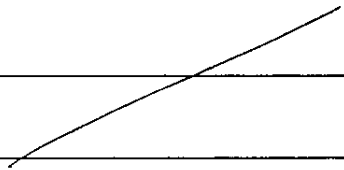
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

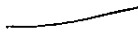
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	TROKEE GROUP, LLC	P O BOX 771840	<input type="checkbox"/> Add
		CORAL SPRINGS, FL 33077	<input checked="" type="checkbox"/> Remove

MGR	ITORO ETUKS	P O BOX 771840	<input checked="" type="checkbox"/> Add
		CORAL SPRINGS, FL 33077	<input type="checkbox"/> Remove


			<input type="checkbox"/> Add
---	---	---	------------------------------

.	.	.	<input type="checkbox"/> Remove
---	---	---	---------------------------------

.	.	.	<input type="checkbox"/> Add
---	---	---	------------------------------



			<input type="checkbox"/> Remove
---	---	--	---------------------------------

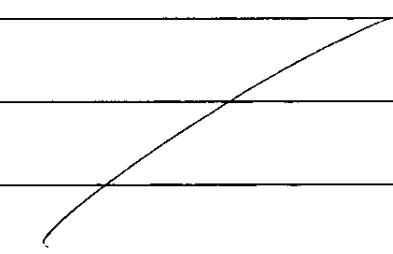
			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
---	---	--	---------------------------------

			<input type="checkbox"/> Add
---	---	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

			<input type="checkbox"/> Add
---	---	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

			<input type="checkbox"/> Add
--	--	--	------------------------------

			<input type="checkbox"/> Remove
--	--	--	---------------------------------

FILED  
18 MAY 17 PM 4:36  
CLERK OF COURT  
ALACHUA COUNTY, FLORIDA

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

*[Handwritten signature across the lines]*

Dated \_\_\_\_\_

*[Handwritten signature]*

Signature of a member or authorized representative of a member

ITORO ETUKS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
13 MAY 17 PM 4:36  
CLERK OF COURT  
TALLAHASSEE, FLORIDA