

L13000103535

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(Address)

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

AUG 19 2013

D. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **Synergy Mechanical Services, 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:

Brenda M. Ferrer

Name of Person

United Group Contractors, LLC

Firm/Company

8884 NW 119 St.

Address

Hialeah, FL 33018

City/State and Zip Code

brenda.ferrer316@gmail.com

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

For further information concerning this matter, please call:

Brenda Ferrer

Name of Person

at **(703) 867 6185**

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

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2013 AUG 15 PM 3:15
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TALLAHASSEE FLORIDA

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

Synergy Mechanical Services, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 07/22/2013 and assigned
Florida document number L13000103535.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

United Group Contractors, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8884 NW 119 Street

Hialeah, FL 33018

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8884 NW 119 Street

Hialeah, FL 33018

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Brenda Ferrer

New Registered Office Address:

8884 NW 119 Street

Enter Florida street address

Hialeah

City

, Florida 33018

Zip Code

New Registered Agent's Signature, if changing Registered 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.

Brenda Ferrer
If Changing Registered Agent, Signature of New Registered Agent

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

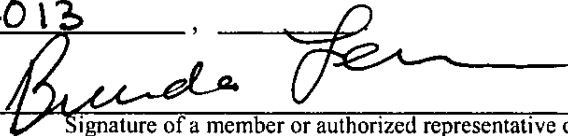
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Brenda M. Ferrer	8884 NW 119 Street Hialeah, FL 33018	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Alejandro J. Estrada, Jr.	8884 NW 119 Street Hialeah, FL 33018	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Bradley A Meigs	4812 Mandolin Ct. Winter Haven, FL 33884	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Ana Garcia	8164 Jamestown Dr. Winter Haven, FL 33884	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 8-12-2013



Signature of a member or authorized representative of a member

Brenda Ferrer

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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