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## COVER LETTER

TQ: 1	Registration Sec Division of Corp	tion orations					
	Syntheon Va	uriflex, LLC					
SUBJEC	TI;	Name of Limite	ed Liability Company	<del></del>			
The enclo	osed Articles of A	Amendment and fee(s) are subm	itted for filing.				
Please re	turn ali correspon	idence concerning this matter to	the following:				
		Stephen J. Kolski					
			Name of Person				
Stephen J Kolski & Associates, PA							
Firm/Company							
2020 Ponce De Leon Blvd., Suite 905A							
		-	Address				
•							
			City/State and Zip Code				
•		sean@Syntheon.com					
		E-mail address: (to	be used for future annual report notified	tion)			
For furth	er information co	oncerning this matter, please cal	N:				
Stephen	J. Kolski		305 371-9576				
	Name of	Person	Area Code Daytime To	elephone Number			
Enclosed	is a check for th	e 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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



(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 March 23, 2016 and assigned Florida document number L16000060975 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Syn Variflex, LLC The new name must be distinguishable and contain 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

## New Registered Agent's Signature, if changing Registered Agent:

Syntheon Variflex, LLC

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 605, 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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member Type of Action Address Title Name □ Add ☐ Remove \_ Change □ Add ..□ Remove \_\_ Change DbA 🗖 \_□ Remove \_\_\_\_\_ Change □ Remove \_\_\_\_\_ Change \_□ Add \_□ Remove \_ Change ☐ Remove

☐ Change

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Effective date, if other than	the date of filing:		1	(optional)	
If an effective date is listed, the date Note: If the date inserted in the document's effective date on the list of the date on the note of the date on the date on the date on the date on the date date on the date on the date on the date on the date on the date on the date on the date da e date date date date date date da e date da e date da e date da e da e da e da e da e	must be specific and cannot be block does not meet t	ot be prior to date of f he applicable statut	lling or more than 90 day ory filing requirement	s after filing.) Pursuant to 605. s, this date will not be liste	.0207 ed as
he record specifies a dela The 90th day after the	yed effective date, record is filed.	but not an effe	ective time, at 12	:01 a.m. on the earlie	er o
Dated March 19	20	19 ·			
	no 12.		sentative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00