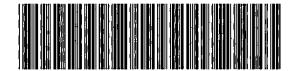
L16000137244

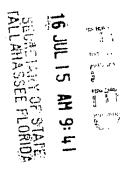
(Re	questor's Name)	
(Address)		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



900287342769

07/15/16--01005--018 **125.00



un 1/25/16

COVER LETTER

TO: Registration Section Division of Corporations	
subject: Synergy	Real Estate Services, LLC Jame of Limited Liability Company
The enclosed Articles of Organization a	nd fee(s) are submitted for filing.
Please return all correspondence concer	ning this matter to the following:
F	Aye Crow Name of Person
Syperqu	Poul Ectate Services, LLC. Firm/Company
2118.	International Speedway Blud Surt 200
Craw	City/State and Zip Code City/State and Zip Code Com (to be used for future annual report notification)
For further information concerning this m	atter, please call:
PAye C'rou Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following an	nount:
\$125.00 Filing Fee \$130.00 Filing Certificate of	
Mailing Address New Filing Section Division of Corporati	Street Address New Filing Section Ons Division of Corporations

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RT	CI	\mathbf{E}	I -	Na	me:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
211 E International SpeedWA- Drugtona Beach, FL32118	m Blud, Surte 203
Daytona Beach FL32118	
	Dame
	· · · · · · · · · · · · · · · · · · ·

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:	Au to
michael Duranceau	E E
Name	五 一
595 W. Granda BIVD, # E	SSE S
Florida street address (P.O. Box NOT acceptable)	M 9
amond Beach, FL 32174	925 +
City State Zip	8m -

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	Title: "AMBR" = Authorized Member	Name and Address:
	"MGR" = Manager	
	mar	The Crow 211 / Finternational Speadway BIND, +20- Drawtons Beach, FL 32118
		- Charles Beach, Fe Seria
•		
	a	
	(Use attachment if necessary)	
ARTIC	LE V: Effective date, if other than the date of	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 days after
	nective date is fisted, the date must be spec e of filing.)	and cannot be more than tive business days prior to or 50 days after
Note:		eet the applicable statutory filing requirements, this date will not be listed as f State's records.
ARTIC	LE VI: Other provisions, if any.	
		20 5
	REQUIRED SIGNATURE:	AH AH
	REOUIRED SIGNATURE:	JUL 15
,	Signature of a men This document is execute I am aware that any false	nber or an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
,	Signature of a men This document is execute I am aware that any false constitutes a third degree	ther or an authorized representative of a member. Id in accordance with section 605.0203 (1) (b), Florida Statutes information submitted in a document to the Department State

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-