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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	o Filing Officer:	
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Office Use Only



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## **COVER LETTER**

TO:

Registration Section

Division of C	orporations		,
FAST GC	DLD, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Greg Herrera		
		Name of Person	
•	Greg Herrera CPA		
		Firm/Company	
	4025 SW 96 Ave		
		Address	
	Miami, Fl. 33165		
		City/State and Zip Code	
	gregherreracpa@gmail.com		
	E-mail address: (	to be used for future annual report noti	fication)
For further information	concerning this matter, please c	all:	
Greg Herrera		786 472-1933	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations 'allahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FAST GOLD, 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  $\frac{08/16/2021}{1}$ Florida document number 1.21000366560 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: PROZYNERGIES LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 501 E Las Olas Blvd. 2nd and 3rd Floor Enter new principal offices address, if applicable: Fort Lauderdale 33301 (Principal office address MUST BE A STREET ADDRESS) 501 E Las Olas Blvd. 2nd and 3rd Floor Enter new mailing address, if applicable: Fort Lauderdale 33301 (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: 501 E Las Olas Blvd. 2nd and 3rd Floor New Registered Office Address: Enter Florida street address Fort Lauderdale

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 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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	1		□Remove
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an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 lote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ocument's effective date on the Department of State's records.  It is a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th;day after the						<u> </u>			_
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d is filed.  Dated June 29  Signature of a member or authorized representative of a member	lan effectiv Note:   If t	ive date is listed, the o the date inserted in	date must be speci i this block does	itic and cannot be p s not meet the app	plicable statutory	or more than 90 days a	after filing.) Pur		
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Filing Fee: \$25.00