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T. MATTHEWS MAR 2 2 2022

COVER LETTER

TO:

Registration Section

Division of Cor	Division of Corporations			
	112- 14/	C 110		
SUBJECT: 24	nergy Wealth of Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	smitted for tiling		
		-		
Please return all correspo	ondence concerning this matter	to the following:		
	-	_		
	Raymond	C. Copelanil		
	·	Name of Person		
	S	Wastth Comment	10	
	- 77Nergy	Wealth Group L		
) ;			
	8 Secr	etary Trail		
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	ran 1-50/0	162 @ amail 100	м	
	E-mail address:	to be used for future annual report not	ification)	
For further information c	oncerning this matter, please c	all:		
Raymond	C. Copeland	at (<u>386</u>) <u>547 · 6 Area Code Daytin</u>	6556	
Name o	of Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	he following amount:			
☐ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	□ \$55.00 Filing Fee &	☐ \$60.00 Filing Fee.	
□ \$2.5.00 Filling Fee	Certificate of Status	Certified Copy	Certificate of Status &	
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)	
			,,	
Mailing Addres	is:	Street Address:		
Registration S	Section	Registration Se		
Division of C		Division of Co		
P.O. Box 632 Tallahassee, l		The Centre of '	Fallahassee oe Street, Suite 810	
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Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Syn ergy Wealth Group LC 22 Han 14, FH 2: 21
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 2/2/2/2022 and assigned Florida document number <u>L 22 0000 95129</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC," 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: Raymond C Copeland Title Change Only Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

and Clopela

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Raymond C. Copeland	8 Secretary Trail	🗆 Add
Chan	ge title from from	Palm Coast FL 32164	□Remove
CE	to MGR Sprot Clopelal	8 Secretary Trail Palm Coast FL 32164	X iChange
	-		
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iffective date, if	other than the date of filing:
Note: If the date in	other than the date of filing:
record specifies a d is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated3/9	2.22
	Signature of a member or authorized representative of a member
	Raymond C. Copeland Typed or printed name of signee
	Typed or printed name of signee