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S. HAWKES MAY 2 9 2009 **EXAMINER**

COVER LETTER

TO: Registration Section Division of Corporations	
suвјест: Synthasys LLC	
(Name	e of Limited Liability Company)
Dear Sir or Madam:	
Dear Sit of Madaii.	
The enclosed Registered Agent/Registered	Office Change and fee(s) are submitted for filing.
Please return all correspondence concernin	g this matter to the following:
Michael Harb	
(Name of Person)	
Synthasys	
(Firm/Company)	
8126 Lakewood Main Street, Suite 202	
(Address)	
Lakewood Ranch, FL 34202 (City/State and Zip Code)	
(6.9	
For further information concerning this ma	tter, please call:
	•
Michael Harb	at (<u>941</u>) <u>556-7901</u>
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations P.O. Box 6327
Clifton Building 2661 Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the follow	ing amount:
2 \$25 Filing Fce	☐ \$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company: Synthasys	
2. (a	Principal office address of limited liability compan (<i>Note: MUST BE STREET ADDRESS</i>)	y: 8126 Lakewood Main Street Suite 202 Lakewood Ranch, FL 34202
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	8126 Lakewood Main Street Suite 202 Lakewood Ranch, FL 34202
10/3/:	2005	m0500005794 = 0
	nte of filing/registration in Florida	4. Document number
5. (a	e) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State
	Registered Agent:	Corporation Service Company
	Registered Office Address:	1201 Hays Street Tallahassee, FL 32301
(b	Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:	W Registered Office address: Michael Harb
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	8126 Lakewood Main Street Suite 202 Lakewood Ranch,FL_34202
that a office hereb	limited liability company is not organized under the fter the change or changes are made, the Florida street of the registered agent will be identical. Or, in the cy confirmed that the change(s) was/were authorized ity copyrany or as afterwise provided in the articles of	et address of the registered office and the business case of a Florida limited liability company, it is by an affirmative vote of the members of the limited
limite	ure of Nnember or authorized representative of a member)	
(Signat	ure of Nnember or authorized representative of a member) MICHAEL HARB d or typed name of signee)	
(Signat	ure of Nnember or authorized representative of a member) MICHAEL HARB d or typed name of signee)	ngree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 **FILING FEE: \$25.00**