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S. WARREN
JUN 1 5 2017

COVER LETTER

TO: Registration Section Division of Corporations						
Mobile Synergy LLC SUBJECT:						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office Chan	ge and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter	to the following:					
Eddy Silvera						
Name of Person	 _					
Mobile Synergy LLC						
Firm/Company						
2011 Lee Street						
Address						
Hollywood FI 33020						
City/State and Zip Code						
eddysd@yahoo.com						
E-mail address: (to be used for future annual repo	rt notification)					
For further information concerning this matter, please c	alt:					
Eddy Silvera Douer at (05 6324665					
Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
₫ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					
INHS18 (2/14)						

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: Mobile Syne	ergy LLC	
2.	(a)	Eddy Silvera Douer	(b)	
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		9553 Harding Ave Ste 302		
		Surfside FI 33154		
		02/14/2017	M1	7000001488
3.		Date of filing/registration in Florida	4.	Document number
5	(a)	Joshua Berkowitz		
5. (a)	(a)	Registered Agent and Registered Office shown on the records of	of the Florida Dep	ot, of State:
		Registered Office Address (MUST BE FLORIDA STREE) 2011 Lee Street	TADDRESS)	
		Hollywood	33154	
1	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Eddy Silvera Douer NEW Registered Office Address: 9553 Harding Ave Ste 302	ed Office addres	FILED 17 JUN 13 PM 2: 04 LUAR NATURISTATE ALLARESSEE FLORIDA
		Surfside	33154	
the age was	cha nt w s/we	mited liability company is not organized under the Inge or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cless of organization of the operating agreement of the	of the register liability comp of the limited	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in
		Edg Mu	Eddy S	Silvera Douer
I h pro the to r not	erel visi obli nero ifieo	ure of a member or authorized representative of a member ov accept the appointment as registered agent and agons of all statutes relative to the proper and completigations of my position as registered agent as providing the reflect of change in the registered office address. It is writing of this change.	gree to act in it ge performanc led for in Cha I hereby confi	Printed or typed name of signee this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept pter 605, F.S. Or, if this document is being filed rm that the limited liability company has been