### m21000011747

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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### **COVER LETTER**

TO: Registration Section Division of Corporations						
SUBJECT: Synergy Expansion, LLC			·			
Name of Foreign	Limited Liab	ility Co	mpany			
Dear Sir or Madam:						
The enclosed application, certificate and fee(s) a	re submitted	for filing	2.			
Please return all correspondence concerning this	matter to the	followir	ng:			
Evan Salvador						
Name of Person		-				
Synergy Expansion, LLC						
Firm/Company		-				
3225 McLeod Drive, Suite 100					~3	
Address		-		SECT	024 O	٠,٣
Las Vegas, NV 89121				E A	2024 DEC -9 PM 4: 24	
City/State and Zip Code		<del>.</del>		ANSS O NS	3 PH	1
esalvador@bayareaenergyca.com				177 C.	÷.	(
E-mail address: (to be used for future annual r	eport notifica	tion)		SECRETARY OF STATE	24	
For further information concerning this matter, p	olease call:					
Evan Salvador	510 at (	962-03	335			
Name of Person	Area Code	& Dayt	ime Telephone Number			
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Divisio The Ce 2415 N	ation Section on of Corporations on tree of Tallahassee J. Monroe Street, Suite 810 assee, FL 32303			
Enclosed is a check for the following at \$25 Filing Fee \$30 Filing Fee & Certificate of Status  CR2E055 (9/15)	mount: □ \$55 Filing Certified C		☐ \$60 Filing Fee, Certificate of Status & Certified Copy	:		

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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appear	s on the records of the Florida Department of
State: Utah	
Enter new principal office address, if applicable:	3225 McLeod Drive
(Principal office address	Suite 100
MUST BE A STREET ADDRESS)	Las Vegas, NV 89121
Enter new mailing address, if applicable:	3225 McLeod Drive
( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u> )	Suite 100
	Las Vegas, NV 89121
2. The Florida document number of this limited lia	7/2021 M21000011747 SECRETARY 7/2021
3. Jurisdiction of its organization: Utah	LLA DEC
4. Date authorized to do business in Florida: 09/0	7/2021
SECTION II (5-9 complete only the applicable of	changes)
5. New name of the limited liability company: (must	changes)  t contain "Limited Liability Company," "L.L.C.," or "LLC."
	for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name C." or "LLC.")
6. If amending the registered agent and/or registere registered agent and/or the new registered office ac	ed officer address on our records, enter the name of the new ddress here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida Street Address
	City , Florida Zip Code
the provisions of all statutes relative to the proper and accept the obligations of my position as regist	nt and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with ered agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited

Fitle/ Capacity	<u>Name</u>	Address	Type of Action
MBR	Salvador, Evan	1883 W Royal Hunte Drive, Suite 200A	DbA
		Cedar City, UT 84720	<b>≣</b> Remove
MBR	Salvador, Elizabeth	1883 W Royal Hunte Drive, Suite 200A	□Add
		Cedar City, UT 84720	■ Remove
Trustee	Salvador, Evan	3225 McLeod Drive, Suite 100	NA DEC
		Las Vegas, NV 89121	EC-9 FIT SEE, FATE
			Remove
			□Add
aforemention	inder the law of which this entity	ated by the official having custody of records in the	□Remove

Filing Fee: \$25.00