## N110000/0/78

(Requ	estor's Name)	
(Addr	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nar	me)
(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	
	<u></u>	

Office Use Only



500246260095

RA 2ddress

04/02/13--01015--009 \*\*35.00



4 /8/13

## COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Synapse House

Name of Corporation

DOCUMENT NUMBER:

N11000010178

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Deborah Giesler

Name of Contact Person

Synapse House

Firm/Company

330 W. Fern St

Address

Tampa, FL 33604

City/State and Zip Code

dmgiesler@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Giesler

<sub>...</sub>312 217-8778

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:** 

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 60/.0502, 61/.0502 ange is submitted for a corporation organi er to change its registered office or registe.	ized under the laws of the State of FL	
1. The name of to	the corporation: Synapse House I office address: 330 W. Fern St., Ta	nc ampa, FL 33604	
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 10/22/2011	Document number: N110000	010178
	d street address of the current registered ag rtment of State: (If resigned, enter resigned		the
	Deborah Giesler		
	11822 Skylake Place		
	Temple Terrace, FL 33617		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):			
	Deborah Giesler	>: :::::::::::::::::::::::::::::::::::	FILE R-2
	330 W. Fern St.		의 <b>그 그</b>
	Tampa, FL 33604	acceptable CO	3: 29 STATE
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its re	egistered agent,
Such change wa authorized by th	as authorized by resolution duly adopted he board, or the corporation has been noti	by its board of directors or by an offitied in writing of the change.	icer so
	are of an other or director	Mark Kovic, Chairman	
I hereby accept I further agree of performance of agent. Or, if th	the appointment as registered agent and to comply with the provisions of all statumy duties, and I am familiar with and act is document is being filed merely to reflet that the corporation has been notified in	ites relative to the proper and comple scept the obligation of my position as ect a change in the registered office a	registered
Deleve	Liesly	Deborah Giesler, Director	
	mature of Registered Agent	Date	
Deborah G	chalf of an entity:		
	yped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

\* \* \* FILING FEE: \$35.00 \* \* \*