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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Synergy School (Of Tomorrow, Inc		
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are s	submitted for filing.		
Please return all correspondence concerning this n	natter to the following:		
Raymond Askew			
· · · · · · · · · · · · · · · · · · ·	(Name of Contact Pers	son)	·
Synergy School Of Tomorrow,Inc			
	(Firm/ Company)	***	
2810 S US Hwy1			
	(Address)		
Fort Pierce			
	(City/ State and Zip Co	ode)	
r.askew@synergyk12.com		1	
E-mail address: (to be t	ised for future annual repo	rt notificatio	n)
For further information concerning this matter, ple	ase call:		
Raymond Askew	at	561	324-9560
(Name of Contact Per			(Daytime Telephone Number)
Enclosed is a check for the following amount mad	e payable to the Florida De	epartment of	State:
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee Certificate of Statu	_	Certil Certil (Add	0 Filing Fee ficate of Status fied Copy fitional Copy is fied)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Ame Divis	et Address indment Section of Corp Centre of T	orations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Synergy School Of Tomorrow, Inc.			
(Document Number	er of Corporat	ion (if known)	
Pursuant to the provisions of section 617,1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Floride</i>	a Not For Profit Cor	poration adopts the following
A. If amending name, enter the new name of the corporati	on:		
name must be distinguishable and contain the word "corporat	ion" or "inco	rporated" or the abb	The new previation "Corp." or "Inc."
'Company" or "Co." may not be used in the name.			202
B. Enter new principal office address, if applicable:			- <u> </u>
Principal office address <u>MUST BE A STREET ADDRESS</u>)			
			΄, ω
			AM 8:
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			8.
			. 0
			
). If amending the registered agent and/or registered office		Florida, enter the n	ame of the
new registered agent and/or the new registered office ac	<u>iaress:</u>		
Name of New Registered Agent:		-	
		(Florida street add	dross)
New Registered Office Address:		(* 10.100	4.007
			Florida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fan		d accept the obligation	ons of the position.
Sig	mature of Ne	w Registered Agent,	if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

nke Jones, v as Kem	ove, unu sun, sa	nin, 57 us un Auu.	
xample: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	$\overline{\underline{V}}$ $\overline{\underline{Mi}}$	nn Doe ke Jones ly Smith	
ype of Action Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
) <u>X</u> Change Add	<u>D</u>	Georgianna M Reiter	2810 S US Hwy 1 Fort Pierce, Fl 34982
Remove) Change X Add	<u>s</u>	Glenda Rambo	2810 US Hwy 1 Fort Pierce, FL 34982
Remove) Change Add Remove			
) Change Add			
Remove // Change Add			
Remove			
) Change Add		-	
Remove			
L. <u>If amending or ad</u> (attach additional s	lding additional heets, if necessa	Articles, enter change(s) here: y). (Be specific)	
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The date of each amendment(s) adoption date this document was signed.	on:		, if other than the
Effective date if applicable:			
Entecure date it applicable.	(no more than 90 days af	er amendment file date)	
Note: If the date inserted in this block do document's effective date on the Department.	es not meet the applicable		s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)		

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s)

was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.					
Dated 11/10/2021					
Signature Signature					
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)					
Donnelyn Khourie					
(Typed or printed name of person signing)					
Director					

(Title of person signing)