င္မာ

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000283965 3)))



H210002839653ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

21 JUL 26 PM 2:42

Ţo:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name :

: TRIPP SCOTT, P.A.

Account Number : 075350000065

: (954)525-7500

Phone Fax Number

: (954)761-8475

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

mmm@trippscott.com

REGISTERED AGENT CHANGE SYNERGY SCHOOL OF TOMORROW JUNIOR COLLEGE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Zoho Sign Document ID: FV-ZAAZEE0YQUZAY2UO0XR7U8-3F0DYMMQ_BOIBHGOI

H21000283965

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

•	provisions of sections 607.0502, 617.0502, 607.1508 nge is submitted for a corporation organized under t		
in orde.	r to change its registered office or registered agent, o	or both, in the State of Florida.	
1. The name of t	he corporation: SYNBRGY SCHOOL OF TOMORRO	OW JUNIOR COLLEGE, INC.	
2. The principal	office address: 2810 S. FEDERAL HIOHWAY, FORT	PIERCE, FL 34982	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 06/10/2019 Docu	ment number: N19000006373	
	I street address of the current registered agent and reptiment of State: (If resigned, enter resigned)	gistered office on file with the	
	RICKEY L. FARRELL, ESQUIRE		
	1397 S.E. PORT ST. LUCIE BLVD	1	
	PORT ST. LUCIE, FL 34952		
6. The กมาาย and (if changed):	d street address of the new registered agent (if change	ed) and /or registered office	
	TANYA L. BOWER, ESQ.		า <u>ี ะ</u> ๆ
	c/o Tripp Scott, P.A., 110 SE 6th Street, 15th Floor	i d	 8字
	P.O Box NOT accepted Fort Lauderdale, FL 33301	ale !!	<u> </u>
The street address changed will	ess of its registered office and the street address of be identical.	the business office of its registered	ngent,
Such change was authorized by ti	as authorized by resolution duly adopted by its boa he board, or the corporation has been notified in wi	rd of directors or by an officer so riting of the change.	
Donn	elyn Khourie DONNLI	EYN KHOURIE, DIRECTOR	
	in of the officer of director	Little of the comments to a title	
Jany.	the appointment as registered agent and agree to to comply with the provisions of all statutes relatived I am familiar with and accept the obligation of ning filed merely to reflect a change in the registered been notified in writing of this change.	act in this capacity. The to the proper and complete perform to position as registered agent. Or diffice address, I hereby confirm the page of the pag	mance if this hat the
If signing on be	chalf of an entity:		
7	yped or Printed Name		
	* * * FILING FEE: \$35.00	* 1 *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)