## PO1000044216

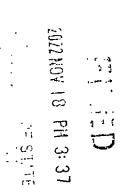
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1 2022

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ION: SYNERGISTIC TI	ECHNOLOGIES I	, INC.	
DOCUMENT NUMBER	P01000044216			
The enclosed Articles of A		bmitted for filing.		
Please return all correspon	dence concerning this ma	tter to the followin	ıg:	
JAN	MES O BEARD JR			
		Name of Conta	ct Person	· · · · · · · · · · · · · · · · · · ·
SY	NERGISTIC TECHNOLO	OGIES I, INC		
<del></del> ,		Firm/ Com	nany.	
200	0 CHENEY HWY STEIC		pany	
		Addres	s	
ТІТ	USVILLE, FLORIDA 32	780		
	<del>,</del>	City/ State and	Zip Code	
jbea	ard@synergistic.com			
	E-mail address: (to be us	ed for future annu	al report no	tification)
For further information co	ncerning this matter, pleas	se call:		
JAMES O BEARD JR		at (	01	212-4193
Name of C	ontact Person		Area Code	& Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Flor	rida Departn	nent of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Copy (Additional copenclosed)	у	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendn Division P.O. Box	Address nent Section of Corporations x 6327 see, FL 32314		Division of The Cent 2415 N. N.	dress nt Section of Corporations re of Tallahassee Monroe Street, Suite 810 we, FL 32303

## Articles of Amendment to Articles of Incorporation of

of Incorporation

		2672 MOV LR FM 3: 37		
(Name o	f Corporation as currently	filed with the Florida Dept. of State)		
		or style		
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new na	ime of the corporation:			
		The new		
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co". A	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2000 CHENEY HWY STE103		
		#314		
		TITUSVILLE, FLORIDA 32780		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2000 CHENEY HWY STE103		
		#314		
		TITUSVILLE, FLORIDA 32780		
		. The idea may of the		
D. If amending the registered agent ar new registered agent and/or the ne	nd/or registered office address	ess in Fiorita, enter the hande of the		
	JODY DEMOLE	•		
Name of New Registered Agent	281 SUN VALLEY ST			
	(Florida str	eet address)		
New Registered Office Address:	TITUSVILLE, FLORIDA	32780 Florida		
		(City) (Zip Code)		
New Registered Agent's Signature, if a line like the like	tered agent. Vam familiar	with and accept the obligations of the position.		
	(Signatyhre of New K	egistered Agent, if changing		
Check if applicable				

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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.

Example: X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	CEO	CORINNA ZEE OWEN	12406 HARNEY DR
Add			ORLANDO, FL 32828
X Remove	21124.5	TANGE O DEADLY ID	1027 PINE VALLEY DR
2) Change	CEO	JAMES O BEARD JR	
X Add			CALERA, AL 35040
Remove 3) Change		· .	
Add			
Remove		•	
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding addition (Attach additional sheets, if necessity)	sary). (Be specific)		
-			
		<u></u>	
<del></del>			
••			
		<u> </u>	
	•		
		alletten of travel shares	
. If an amendment provides for	an exchange, reclassification, or canc he amendment if not contained in the	amendment itself:	
(if not applicable, indicate	V/A)		
(a abbureated marrate	,		

. .

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	<del></del>
Effective date if applicable:	
(no more than 90 days	ifter amendment file date)
Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's records.	atutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of action was not required.	f directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The numb by the shareholders was/were sufficient for approval.	er of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through versus to be separately provided for each voting group entitled to vote see	oting groups. The following statement parately on the unendment(s):
"The number of votes east for the amendment(s) was/were suffi	cient for approval
by	, n
(voting group)	
Dated 6/2/2022 Signature Jame o Breeze	
Signature Lame o Breeze	e. Jr.
(By a director, president or other officer - it	directors or officers have not occu
selected, by an incorporator – if in the hand appointed fiduciary by that fiduciary)	s of a receiver, trustee, or other court
James O Bear	rd Jr
(Typed or printed name of	f person signing)
CED	
(Title of person signing)	



August 22, 2022

JAMES O BEARD JR 2000 CHENEY HWY STE 103 #314 TITUSVILLE, FL 32780

SUBJECT: SYNERGISTIC TECHNOLOGIES I, INC.

Ref. Number: P01000044216

We have received your document for SYNERGISTIC TECHNOLOGIES I, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 222A00018617



September 28, 2022

JAMES O BEARD JR 2000 CHENEY HWY STE 103 #314 TITUSVILLE, FL 32780

SUBJECT: SYNERGISTIC TECHNOLOGIES I, INC.

Ref. Number: P01000044216

We have received your document for SYNERGISTIC TECHNOLOGIES I, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

You failed to make the correction(s) requested in our previous letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 422A00021664

Anissa Butler Regulatory Specialist II

www.sunbiz.org

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