

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6380

From: Account Name : FOWLER, WHITE 2
Account Number : I19990000148
Phone : (813)769-7692
Fax Number : (813)228-9401

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

Email Address: _____

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14 AUG 11 PM 2:34

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE
SYNERGY CLINICAL SERVICES, INC.

Certificate of Status	0
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Corporate Filing Menu

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DR
8/12/14

H14000188778 3

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SYNERGY CLINICAL SERVICES, INC.
(Name of Corporation)

DOCUMENT NUMBER: P03000062874

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kendra L. Gaugush

Fowler White Boggs

501 E. Kennedy Blvd., Ste 1700

Tampa, FL 33602

For further information concerning this matter, please call:

Kendra L. Gaugush at (813) 228-7411
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

FILED

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2014 AUG 11 AM 10:19

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,

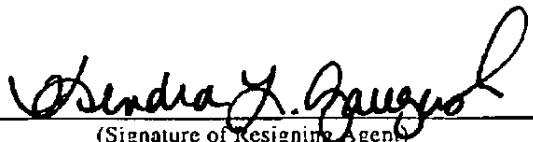
FOWLER WHITE BOGGS BANKER P.A. n/k/a Fowler White Boggs

hereby resigns as Registered Agent for **SYNERGY CLINICAL SERVICES, INC.**

P03000062874
(Document Number)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

FOWLER WHITE BOGGS BANKER P.A. n/k/a Fowler White Boggs c/o Kendra L. Gaugush
(Typed or Printed Name)

Authorized Representative
(Capacity)

Fee for filing this document:
\$87.50 - Active Corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

H14000188778 3