

P04000057258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

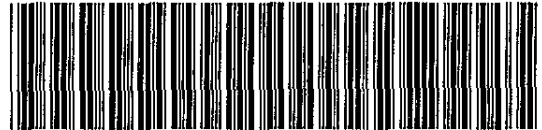
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Adrian Miller GAVE
AUTHORIZATION BY PHONE TO
CORRECT *Old & New Address for RA*
DATE *08/18/05*
DOC. EXAM. *Diannell*

Office Use Only



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08/15/05--01019--023 **35.00

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 AUG 15 PM 3:06

PO Change

08/18/05

DC

**Synergy Pharmacy
Consultants, inc.**

118 Valencia Circle
St. Petersburg, FL 33716
727-409-7023

July 26, 2005

DOS Division of Corporations

PO BOX 6327
Tallahassee, FL 32314

Attn: Amendment Section

This letter is to inform that Synergy Pharmacy Consultants, inc. has a new address . The new address is 118 Valencia Circle, St. Petersburg FL 33716. This is the principal place of business and the mailing address. In addition the Registered Agent and Officer/Director Detail address has changed as well to 118 Valencia Circle, St. Petersburg FL 33716. I did not state this in the previous notification. Please update your records. The old Belcher road address no longer exists. Thank you in advance.

Sincerely,



Andrew J. Miller
President

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SYNERGY PHARMACY CONSULTANTS, INC.
(Name of corporation)

DOCUMENT NUMBER: P04000057258

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:

ANDREW J. MILLER
(Name of contact person)

SYNERGY PHARMACY CONSULTANTS, INC.
(Firm/Company)

118 VALENCIA CIRCL
(Address)

ST. PETERS BURG, FL 33716
(City/state and zip code)

For further information concerning this matter, please call:

ANDREW J. MILLER at (727) 409 7023
(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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

July 29, 2005

SYNERGY PHARMACY CONSULTANTS, INC.
118 VALENCIA CIRCLE
ST. PETERSBURG, FL 33716

SUBJECT: SYNERGY PHARMACY CONSULTANTS, INC.
Ref. Number: P04000057258

The principal/mailling address of the corporation has been updated per your request. You are required by law to notify this office of a change of registered agent and/or registered office. Please note that any change to the registered agent/registered office must either be made on your current year Annual Report/Uniform Business Report form, provided it has not already been filed, **OR** on the enclosed registered agent/registered office change form. Please note there is a \$35 fee for filing this form.

If you have any questions concerning this matter, please either respond in writing or call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 405A00049382

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: SYNERGY PHARMACY CONSULTANTS, INC.
2. The principal office address: 118 VALENCIA CIRCLE
ST. PETERSBURG FL, 33716
3. The mailing address (if different): (SAME AS ABOVE)

4. Date of incorporation/qualification: 4/5/04 Document number: P04000057258

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

ANDREW J. MILLER

500 SOUTH BELCHER RD., 118

ST. PETERSBURG, FL 33771

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ANDREW J. MILLER

118 VALENCIA CIRCLE

(P.O. Box NOT acceptable)

ST. PETERSBURG, FL 33716

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Andrew J. Miller
(Signature of an officer or director)

ANDREW J. MILLER
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Andrew J. Miller
(Signature of Registered Agent)

8/9/05
(Date)

If signing on behalf of an entity:

ANDREW J. MILLER
(Typed or Printed Name)

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