## PD4000099204

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## **COVER LETTER**

TO: Amendment Section

Division of Corporatio	ns 🦚		
NAME OF CORPORATI	ON: Accounting Firms	Sales Inc.	
DOCUMENT NUMBER:			
The enclosed Articles of An			
_		_	
Please return all correspond	ence concerning this ma	itter to the following:	
Odal	ys Lara		
		Name of Contact Pers	oon
Acco	unting Firm Sales Inc.		
		Firm/ Company	<del>-</del>
2105	Drew Street Suite 200		
		Address	
Clear	water, Florida 33765	_	
		City/ State and Zip Co	ode
olara@lwfo	rensics.com		
1	E-mail address: (to be us	sed for future annual repo	rt notification)
For further information conc	erning this matter, pleas	se call:	
Odalys Lara		at (727	466-0777
Name of Cor	tact Person		Code & Daytime Telephone Number
Enclosed is a check for the f	ollowing amount made	payable to the Florida De	partment of State:
S35 Filing Fee C	3\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section f Corporations	Amer Divis Clifte	et Address Indment Section It ion of Corporations In Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Accounting Firm Sales Inc.			
(Name	of Corporation as curren	ntly filed with the Florida Dept. of State)	
P04000099204		0/5 A	//
	(Document Number	of Corporation (if known)	$ \langle                                   $
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	of Corporation (if known)  is Florida Profit Corporation adopts the following amendment(s	S) to
A. If amending name, enter the new n	ame of the corporation:		. ' '
Synergetics Brokerage Group Inc.		The new ?	). ).
	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	.g <sup>g</sup>
B. Enter new principal office address, if applicable:		2105 Drew Street Suite #200	
Principal office address <u>MUST BE A S</u>		Clearwater, Florida	
		33765	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
D. If amending the registered agent an new registered agent and/or the ne		dress in Florida, enter the name of the ss:	
Name of New Registered Agent			
	(Florida s	treet address)	
Now Decision J.O.C. 431	N/A	N/A	
New Registered Office Address:		, Florida (City) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			
	Signature of New	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.

Example:		y Sman, Sr as an Mae.	
X Change	<u>PT</u>	John Doe	
X Remove	$\overline{\Lambda}$	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		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			
3)Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

E., <u>If a</u> (At	amending or adding tach additional sheets	additional Articles	<mark>s, enter chang</mark> Be specific)	e(s) here:			
N/A		i, ij necessary). (1	be apecigicy				
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r tea	ın amendment provi	dee for an exchang	ro voolonsifiaa	tion or consoll	lation of issued a	hawaa	
r. <u>11 a</u> pr	rovisions for implem	enting the amendn	nent if not con	tained in the a	mendment itself:	uares,	
	(if not applicable, i	indicate N/A)				•	
N/A							
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			<del></del>	<u> </u>		<del></del>	

, ,	N/A	
The date of each amendment(s) ad	option:	, if other than the
ate this document was signed.	•	
M/A ffective date <u>if applicable</u> :		
incenve date <u>ii applicative</u> .	(no more than 90 days after amendment file date)	
lote: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, the partment of State's records.	is date will not be listed as the
doption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendm ficient for approval.	ent(s)
	oved by the shareholders through voting groups. The following state arch voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by N/A	n	
<u> </u>	"  (voting group)	
action was not required.	oted by the board of directors without shareholder action and shareholder by the incorporators without shareholder action and shareholder	
November 1	9. 2015	
Dated	Days Laya  ector, president or other officer – if directors or officers have not b	aon .
selected	by an incorporator – if in the hands of a receiver, trustee, or other d fiduciary by that fiduciary)	
(	Odalys Lara .	
-	(Typed or printed name of person signing)	
I	resident, Owner, Broker	
-	(Title of person signing)	