P04000168913

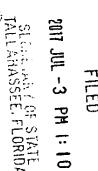
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C. GOLDEN

JUL 1 0 2017

COVER LETTER

TO: Amendment Section Division of Corporations Synergy Transworld Inc. Name of Corporation P04000168213 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: José Antonio Serrano Name of Contact Person Synergy Transworld Inc. 22831 SW 88th PL #204 Address Cutler Bay, FL 33190 City/State and Zip Code financing@synergytw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: José Serrano Area Code & Daytime Telephone Number Name of Contact Person

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327

Division of Corporations Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Street Address:

Amendment Section

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

statement of cha	provision's of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of rochange its registered office or registered agent, or both, in the State of Florida.		
1. The name of t	the corporation: Synergy Transworld Inc.		
2. The principal Cutler Ba	office address: 22831 SW 88th PL #204 y, FL 33190		
3. The mailing a Cutler E	ddress (if different): 22831 SW 88th PL #204 Bay, FL 33190		
4. Date of incorp	poration/qualification: 12-12-2004 Document number: P04000168213		
5. The name and	I street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)		
	8838 West Flagler St. #203		
	Miami, FL 33174		
	No.		
6. The name and (if changed):	6. The name and street address of the new registered agent (if changed) and /or registered officer (if changed):		
	22831 SW 88th PL #204		
	Cutler Bay, FL 33190		
	P.O. Box NOT acceptable		
=	ess of its registered office and the street address of the business office of its registered agent, be identical.		
Such change wa authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.		
9.51	José A. Serrano - president Printed or typed name and title		
Lhereby accept I further agree to performance of	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered is document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change.		
Sign	parting of Registered Agent Date		
If signing on be	half of an entity:		
Jose	A - SERRANO vped or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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