

P05000070044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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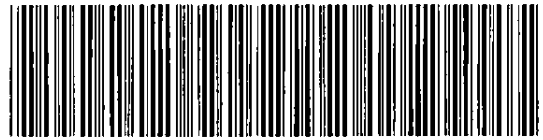
(Business Entity Name)

(Document Number)

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2024 OCT -8 PM 12:41  
TALLAHASSEE, FLORIDA



Toll-Free: 1.888.449.2638

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October 2, 2024

Registration Section  
Division of Corporations  
2415 N. Monroe St., Suite 810  
Tallahassee, FL 32303

RE: Synergy Financial Services Incorporated

To whom it may concern:

The Enclosed Articles of Amendment and Fee(s) are submitted for filing.  
Also, please find enclosed a check for state filing fees in the amount of **\$43.75**  
made payable to the FL Dept of State. For information to this filing at the  
undersigned.

Thank you in advance and please return all correspondence in regards to this  
filing using the pre addressed stamped envelope included.

Sincerely,

**Amanda J. Beren, Document Processor**  
CorpNet, Incorporated  
888-449-2638 Ext. 105  
[filings@corpnet.com](mailto:filings@corpnet.com)



Articles of Amendment  
to  
Articles of Incorporation  
of

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2024 OCT -8 PM 12:41

SYNERGY FINANCIAL SERVICES, INC.

(Name of Corporation as currently filed with the Florida Dept. of State, TALLAHASSEE, FLORIDA)

P05000070044

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

6501 Pavone Street

Lake Worth, FL 33467

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

6501 Pavone Street

Lake Worth, FL 33467

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent Registered Agents Inc

7901 4th St. N. Suite 300

(Florida street address)

New Registered Office Address: St. Petersburg

(City)

Florida 33702

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

David Roberts

Signature of New Registered 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 Doe  
  
X Remove                      V              Mike Jones  
  
X Add                              SV              Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>X</u> Change	Pres	Penelope Davis	6501 Pavone Street
_____ Add			Lake Worth, FL 33467
_____ Remove			
2) <u>X</u> Change	Director	Penelope Davis	6501 Pavone Street
_____ Add			Lake Worth, FL 33467
_____ Remove			
3) <u>X</u> Change	Sec	Penelope Davis	6501 Pavone Street
_____ Add			Lake Worth, FL 33467
_____ Remove			
4) <u>X</u> Change	Treas	Penelope Davis	6501 Pavone Street
_____ Add			Lake Worth, FL 33467
_____ Remove			
5) _____ Change			
_____ Add			
_____ Remove			
6) _____ Change			
_____ Add			
_____ Remove			

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

[illegible]

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_  
(voting group)

Dated Oct 1, 2024

Signature Penelope Winderly Davis

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Penelope Davis

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)

TALLAHASSEE, FLORIDA

2024 OCT - 8 PM 12:41

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