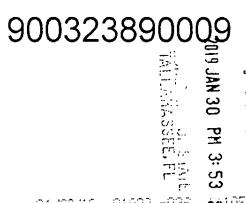
P160000 43796

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: SYN-Thatch of FLORIDA, INC. Name of Corporation
DOCUMENT NUMBER: P16000043796
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:
Christing E. Fulch Name of Contact Person
Stw-Tratch of 72-inc
4007 SW CheroKer ST
PMM Cyty F2 34990 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (561) Sleb - 5924 Area Code & Daytime Telephone Number
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address: Amendment Section Street Address: Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

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

1. The name of the corporation: SYP-ThACK of FLOURA, DC. 2. The principal office address: 4007 SW Cherokee ST PAIN City, FL 34990 3. The mailing address (if different): SHME 4. Date of incorporation/qualification: 5/W/16 Document number: P16 0000 43796 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) (hristing E. Fuller 9539 Newport Rd Boca Raton, FLB434 6. The name and street address of the new registered agent (if changed) and/or registered office (if changed): (hristing E. Fuller Political E. Fuller Christing E. Fuller Political E. Fuller Christing E. Fuller Christing E. Fuller Christing E. Fuller Christing E. Fuller Political Experiment of the corporation has been notified in writing of the change. Christing E. Fuller Christing E. Fuller Political Experiment of the proper and complete performance of my duties, and I am Jamiliar with and accept the obligation of my position as registered performance of my duties, and I am Jamiliar with and accept the obligation of my position as registered performance of my duties, and I am Jamiliar with and accept the obligation of my position as registered free performance of my duties, and I am Jamiliar with and accept the obligation of my position as registered free performance of my duties, and I am Jamiliar with and accept the obligation of my position as registered free performance of my duties, and I am Jamiliar with and accept the obligation of my position as registered free performance of my duties, and a my Jamiliar with and accept the obligation of my position as registered free performance of my duties, and a my Jamiliar with and accept the obligation of my position as registered free performance of my dut	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 in order to change its registered office or registered agent, or both, in the State of Florida.
4. Date of incorporation/qualification: 5/16/16 Document number: P16 0000 43796 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Christina E. Full CR Boca Raton, FB434 6. The name and street address of the new registered agent (if changed) and/or registered office of (if changed): Christina E. Full CR POBOX NOT acceptable PAM CHY, FB3490 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. Christia E. Full CR Signature of an officer or director I hereby accept the appointment as registered agent and agree to act in this capacity, I further agree to compily 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 his 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. Date PAM CHY 17 18 18 18 18 18 18 18 18 18 18 18 18 18	1. The name of the corporation: SYP-Thatch of Florida, IDC.
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Christina S. Turun July 19 1/24/19 Signature of Registered Agent Date	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.
If signing on behalf of an entity:	Obrita S. Tuer Signature of Registered Agent Date 124/19
	If signing on behalf of an entity:
Typed or Printed Name	Typed or Printed Name

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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