## P17000024524

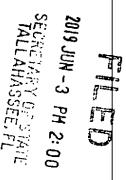
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JUN 1 8 2019 C Kinsey

## <u>cöver letter</u>

TO: Amendment Section **Division of Corporations**  \$°

NAME OF CORPO	RATION: SYNERGY PETR	OLEUM GROUP, INC.			
DOCUMENT NUMI					
	of Amendment and fee are so	ibmitted for filing.			
Please return all corre	spondence concerning this ma	itter to the following:			
	GREG K GONZALEZ				
	Name of Contact Person				
	GREG K GONZALEZ CPA PA				
	Firm/ Company				
	7900 OAK LANE SUITE 400				
	Address				
	MIAMI LAKES, FL 33016				
	City/ State and Zip Code				
GREG	G@GGCPACO.COM				
<del></del>	E-mail address: (to be us	sed for future annual report	notification)		
	n concerning this matter, pleas				
GREG K GONZALE		at (	342-3760 )		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□S43.75 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)		
Mailino Address		Street	Address		

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

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

## Articles of Amendment to Articles of Incorporation of

SYNERGY PETROLEUM GROUP, INC.

	as currently filed with the Florida Dept. of State)
P17000024524	as convently med with the Florida Dept. Withate,
(Document	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corpo	oration:
uma nuct ha distinguishable and contain the world."	Thenew "corporation," "company," or "incorporated" or the abbreviation
	"Inc," or "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRE</u> .	<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	JUN TO ALL ALL ALL ALL ALL ALL ALL ALL ALL AL
<u></u>	ASS W TO
<ol> <li>If amending the registered agent and/or registered of</li> </ol>	office address in Florida, enter the name of the Fig. 0
new registered agent and/or the new registered office	
Name of New Registered Agent	
	tFlorida street address)
New Registered Office Address:	tFlorida street address) , Florida

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	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	D	ANUP SARKER	3643 SW 167TH AVENUE	
X Add			MIRAMAR, FL 33027	
Remove				
2) Change	D	HASAN MOHAMMAD SHAHRIAF	4901 NW 57TH ST	
X Add			TAMARAC, FL 33319	
Remove				
3 ) Change		_		
Add				
Remove			<del></del>	
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<del></del>	
_	
If an amondment provides for an eyel	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ac	loption:	, if other than
date this document was signed.	8/2019	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	r
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
05/28/2019		
Dated	lohand Horsian	
selected	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	
	MOHAMMAD M HOSSAIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	