## P17000056475

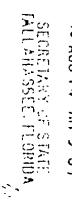
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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: BOYER SYNERGISTIC, INC DOCUMENT NUMBER: <u>P17000056475</u> The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ERIK N. BOYER SR.

Name of Contact Person BOYER SYNERGISTIC, INC. 180 ROSEWIND TRAIL MAITLAND, FL 32751

City/ State and Zip Code

(BOYERO 17 G) GMAIL, COM

E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ERIK N, BOYER SR, at (407) 848-9832

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee **□\$43.75** Filing Fee & □\$52.50 Filing Fee **□\$43.75** Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed)

**Mailing Address** 

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

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

## Articles of Amendment to Articles of Incorporation of

BOYER SYNERGI	STIC INC
(Name of Corporation as currently fi	led with the Florida Dept. of State)
P17000056475	
(Document Number of Co	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.)	". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	180 ROSEWIND TRAIL
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	MAITLAND, FL 32751
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	180 ROSEWINO TREILES  MAITLAND, FL 3251 T
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	37
(Florida street	(daress)
New Registered Office Address:	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	h and accept the obligations of the position
I hereby accept the appointment as registered agent. I am familiar wit	п ини иссерь те оондиналь од те ролина.
Signature of New Rev	istered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 = Chie Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offic 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 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change	<u>s/7</u>	MYRTLE Y. REDDING	2805 GULFSTREAM CT
Add			ORLANDO, FL 3280S
_X_Remove			
2) Change			
Add			
Remove			SEC.
3 ) Change			
Add			SA F
Remove			
4) Change			9: 37 TALE ORIDA
Add			***************************************
Remove			
5) Change		-	<del></del>
Add			
Remove			4111
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
(Titales) tales in colon, y secondary, (colon, colon, colo	
	SEE SEE
	19 AUG SECRE FALL AH
	788 YAY
	111
If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	r= (z)
provisions for implementing the amendment if not contained in the amendment itself:	9: 3 1A1:
(if not applicable, indicate N/A)	37 0 <sub>A</sub>
	· 

The date of each amendment(s) adoption:	, if other than
Effective date if applicable: JULY 15, 2019  (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 locument's effective date on the Department of State's records.	not be listed as
Adoption of Amendment(s) (CHECK ONE)	
☐ 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) ≥ co	19
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	AUG T
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	±
Dated_AUG-8-2019	
Dated_AUG-8-2019 Signature_/WMo Bayer EXE	7
(If y 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)	
(Typed or printed name of person signing)	
PRESIDENT (Title of person signing)	