P18000042319

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
P WAIT	MAIL			
(Business Entity Name)	 			
(Document Number)				
Certificates of	Status			
Special Instructions to Filing Officer:				
	(Address) (Address) (City/State/Zip/Phone #) (Business Entity Name) (Document Number) Certificates of			

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04/27/21--01017--010 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: SYNERGROUP I	NC		
DOCUMENT NUMB	ER: P18000042319			
The enclosed Articles of	of Amendment and fee are su	ibmitted for filing.		
Please return all corresp	pondence concerning this ma	atter to the following:		
	ANINIA ATRAKAS			
_	ANNA ATAMAS	Name of Contact Person	1	
	0.45.150.00.00.00.00.00			
<u>-</u>	SYNERGROUP INC	Firm/ Company		
		, ,		
<u>. (</u>	600 CLEVELAND ST SUIT	`E 373 Address		
		Address		
	CLEARWATER, FL 33755			
		City/ State and Zip Cod	e	
	atamas.anna@gmail.com			
<u>-</u>	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, plea-	se call:		
ANNA ATAMAS		at (727) 656-1199	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee &	□\$43.75 Filing Fee &	□\$52.50 Filing Fee	
	Certificate of Status	Certified Copy (Additional copy is	Certificate of Status Certified Copy	
		enclosed)	(Additional Copy	
		,	is enclosed)	
Maili	ing Address	Street	Address	
	idment Section		ment Section	
	Division of Corporations Division of Corporations			
P.O. Box 6327		The Co	entre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

SYNERGROUP INC		
(Name)	of Corporation as currer	ntly filed with the Florida Dept. of State)
P18000042319		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
		The new
	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address,	if applicable:	600 CLEVELAND ST SUITE 373
(Principal office address MUST BE A S		CLEARWATER, FL 33755
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		600 CLEVELAND ST SUITE 373
		CLEARWATER, FL 33755
		:
D. If amending the registered agent ar new registered agent and/or the new		
		<u> </u>
Name of New Registered Agent	ANNA ATAMAS	
	600 CLEVELAND ST S	
	(Florida :	street address)
New Registered Office Address:	CLEARWATER	Florida 33755 ယိ
		(City) (Zip Code)
N		
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: r with and accept the obligations of the position.
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		() L
	מוט	7
	Signature of Ne W	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.

X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
_X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	MGR	_	Konstantin Novikov	630 WELLS COURT #402
Add				CLEARWATER, FL 33756
X Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		<u>-</u> _		
Add				
Remove				

	nding or adding a additional sheets,		(Be specific)				
	,	y we banker jy.	(20 0)(0)				
							
		· · ·					
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					-		
							
· ··· - · · ·							
If an a	mendment provid	des for an exch:	ange, reclassif	<u>ication, or cane</u>	ellation of issue	ed shares,	
provi	sions for impleme	nting the amer	<u>idment if not o</u>	contained in the	<u>amendment it</u>	<u>self:</u>	
(<u>i</u>	if not applicable, in	idicate N/A)					
	 - · · · · ·						 -
	<u>-</u>						
				<u>. </u>			

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The date of each amendment(s) as date this document was signed.	doption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendme	ent file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors wit	hout shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cas afficient for approval.	t for the amendment(s)
	proved by the shareholders through voting groups. each voting group entitled to vote separately on the	
"The number of votes cast	for the amendment(s) was/were sufficient for appro	oval
by	(voting group)	"
	(voting group)	
Dated <u>04/19/2021</u>		
Signature	st oly	
selecte	rector, president of other officer – if directors or of d, by an incorporator – if in the hands of a receiver, ted fiduciary by that fiduciary)	
	ANNA ATAMAS	
	(Typed or printed name of person signif	ng)
	PRESIDENT	
	(Title of person signing)	