

P20 0000 21739

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

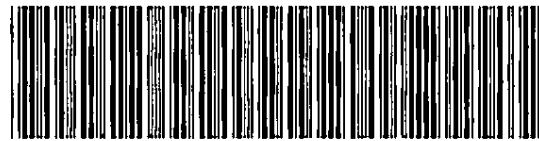
(Business Entity Name)

(Document Number)

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Office: 561-515-0838

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August 6, 2021

VIA FEDEX

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St., Suite 810
Tallahassee, FL 32303

Re: ODC Synergy, Inc.
Document No. P20000021739

Dear Sir or Madam:

I have enclosed a copy of Articles of Amendment which we believed were filed with your office in May, 2021, to correct a typographical error in the spelling of the above-referenced Corporation. Additionally, in that same Amendment we had intended to add Carmen A. Olivares Williams as an authorized Representative of the Corporation (see Page 3). While we have confirmed that the typographical error was rectified by your office (from "mODC" to "ODC"), we have noted that Ms. Williams as not added as requested.

Accordingly, I have enclosed the Articles of Amendment requesting that Carmen A. Olivares Williams be added to the officers as an Authorized Representative of ODC Synergy, Inc. Our check in the amount of \$35.00 is included to cover the filing fee for this matter. Should you have any questions, feel free to contact my office. Thank you for assistance.

Sincerely,

Zachary Phillips

Zachary Phillips, Esq.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: mODC Synergy Inc.

DOCUMENT NUMBER: P20000021739

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Zachary Phillips, Esq.

Name of Contact Person

Kelk Phillips P.A.

Firm/ Company

12773 Forest Hill Blvd., Suite 106

Address

Wellington, FL 33414

City/ State and Zip Code

zachary@kelkphillips.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Zachary Phillips, Esq.

Name of Contact Person

at (561) 251-5481

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 &
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)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

mODC Synergy Inc.

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

P20000021739

(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**)*

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

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 Kelk Phillips P.A.
12773 Forest Hill Blvd., Suite 106
(Florida street address)

New Registered Office Address: Wellington, Florida 33414
(City) (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.



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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	Auth Re	Carmen A. Olivares Williams	166 Cypress Trace
<input checked="" type="checkbox"/> Add			Royal Palm Beach, FL 33411
<input type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	Presiden	Charles J. Williams	166 Cypress Trace
<input checked="" type="checkbox"/> Add			Royal Palm Beach, FL 33411
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

May 7, 2021

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 May 7, 2021

Signature _____
(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)

Charles J. Williams

(Typed or printed name of person signing)

CEO, President

(Title of person signing)