F04000005836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

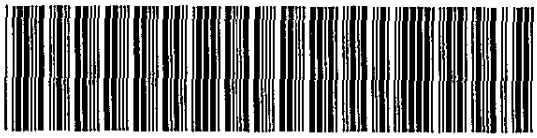
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200047560012

03/09/05--01015--019 **35.00

FILED
05 MAR -9 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: REGISTERED AGENT - XL TechGroup, Inc.

DOCUMENT NUMBER: _____

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:

MARK R. MOHLER
(Name of contact person)

XL TechGroup, Inc.
(Firm/Company)

1901 S. Harbor City Blvd, Suite 300
(Address)

Melbourne, FL 32901
(City/state and zip code)

For further information concerning this matter, please call:

MARK R. MOHLER at (321) 409-7429
(Name of contact person) (Area code & daytime telephone number)

Enclosed is a $35.00 check made payable to the Department of State.

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

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

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

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: **XL TechGroup, Inc.**

2. The principal office address: 1901 S. Harbor City Blvd. 3rd Floor
Melbourne, FL 32901

3. The mailing address (if different):_____

4. Date of incorporation/qualification: **10/11/04** Document number: F04000005836

5. The name and address of the current registered agent and office:

Stephen M. Rubin, Esq.
5300 Wachovia Financial Center, 200 S. Biscayne Boulevard
Miami, Florida 33131

FILED
05 MAR -9 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P.O. Box **Not** Acceptable)

MARK R. MOHLER
1901 Harbor City Blvd., Suite 300
Melbourne, FL 32901

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.

_____ 2/22/2005
(Signature of an officer, chairman or vice chairman of the board) (Date)

MARK R. MOHLER GENERAL COUNSEL
(Printed or typed name and title)

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.

_____ 2/22/2005
(Signature of Registered Agent) (Date)

If signing on behalf of an entity:

_____
(Typed or Printed Name)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314