# 693564

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
•		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: Xebec, Incorporated

Name of Corporation

DOCUMENT NUMBER: 693564

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:

### **April Cliche**

Name of Contact Person

Xebec, Incorporated

Firm/Company

3111 Paces Mill Rd. Ste. A-250

Address

Atlanta, GA 30339

City/State and Zip Code

### acliche@hallmarkco.com

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

For further information concerning this matter, please call:

April Cliche

,770 984-2100x118

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



January 12, 2016

APRIL CLICHE 3111 PACES MILL RD STE A-250 ATLANTA, GA 30339

SUBJECT: XEBEC, INCORPORATED

Ref. Number: 693564

please find attached revised document.

Thank you!

We have received your document for XEBEC, INCORPORATED and your check(s) totaling \$695.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 616A00000755

#### (سمنونندر) (سمنونندر)

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

Pursuant to the provisions of sections 607.0502, 617.050		
statement of change is submitted for a corporation organ	• • • • • • • • • • • • • • • • • • • •	
in order to change its registered office or regist	·	
1. The name of the corporation: Xebec, Incorporat		
2. The principal office address: 4040 West Newberry Road, Suite 950B		
Gainesville, Florida 32607		
3. The mailing address (if different): 3111 Paces M	ill Road, Suite A-250	
Atlanta, Georgia 30339		
4. Date of incorporation/qualification: 06/29/1981	Document number: 693564	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)		
Susan Adams		
4040 West Newberry Road, Suite 950B		
Gainesville, Florida 30607		
6. The name and street address of the new registered ages (if changed):	w-d	
Hallmark Group Se	rvices of Horida, ELC	
4040 West Newberry Road, Suite 950B		
P.O. Box NOT	acceptable	
Gainesville, FL 32607		
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 authorized by the board, or the corporation has been not	by its board of directors or by an officer so tified in writing of the change.	
Moste Western	Martin H. Petersen	
Signature of an officer or director	Printed or typed name and title	
I hereby accept the appointment as registered agent am I further agree to comply with the provisions of all state performance of my duties, and I am familiar with and a agent. Or, if this document is being filed merely to refle hereby confirm that the corporation has been notified in	d agree to act in this capacity. Ites relative to the proper and complete ccept the obligation of my position as registered ect a change in the registered office address, I In writing of this change.	
Most Western	10/30/2015	
Signature of Registered Agent	Date	
If signing on behalf of an entity:		
Martin H. Petersen		
Typed or Printed Name		
* * * FILING FE	E: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)