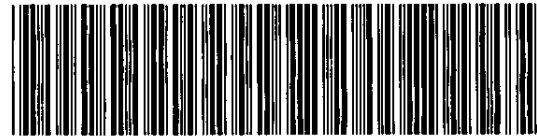


FD6000002492



200251107332

(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:

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DEPARTMENT OF STATE

RA/RO/CH8
@ 9.11.13



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 788097 7588359

AUTHORIZATION :

[Handwritten signature]

COST LIMIT : \$ 35.00

ORDER DATE : September 5, 2013

ORDER TIME : 2:43 PM

ORDER NO. : 788097-010

CUSTOMER NO: 7588359

CHANGE OF AGENT

NAME: XACTFORM USA, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XXXXX__ PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

[Handwritten initials "10" inside a circle]

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

1. The name of the corporation: XACTFORM USA, INC.
2. The principal office address: 11 MIRACLE STRIP LOOP, PANAMA BEACH, FL, 32407
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/21/2006 Document number: F06000002492
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)

JOSEPH BUTLER

11 MIRACLE STRIP LOOP

PANAMA CITY BEACH, FL 32407

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

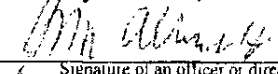
1201 Hays Street

P.O. Box NOT acceptable

Tallahassee, FL 32301

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.


Signature of an officer or director

JOHN ALLMETT, PRESIDENT
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.

Corporation Service Company
By: 
Signature of Registered Agent

9-10-13
Date

If signing on behalf of an entity:

Sue G. Knight
Typed or Printed Name
Assistant Vice President

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2F045 (03/12)

FILED
SEP 10 2013
13 SEP 10 PM 2:50