## F 11000001440

(Requestor's Name)
(Address)
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## **COVER LETTER**

	ent Section Division of Corporation	ons	
SUBJECT:E	XP U.S. Services Inc.	of Corporation	
DOCUMENT NU	£11000001440	of Corporation	
	ndment and fee are submitted for	filing	
	rrespondence concerning this ma	_	
riease return an co	respondence concerning this man	ner to the following.	
Lee Eland			
	Name of Contact Person		
EXP U.S. Services	Inc.		
	Firm/Company		
1595 Clark Boulev	ard		
	Address		
Brampton, Ontario	, Canada L6T 4V1		<b>~</b>
	City/State and Zip Code		123.
licenses@exp.com			DEUNETHRY DE STATO TALLAHASSEE.FL
E-mail addre	ss: (to be used for future annual re	eport notification)	ANS A
For further informa	ation concerning this matter, pleas	se call:	SEE
Hae-Jin (Priscilla)	Ahn	416 587-8065	
Namo	e of Contact Person	Area Code & Daytime	Telephone Number 57
Enclosed is a cheel	c for the following amount:		
]\$35 Filing Fee	☒ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

**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

## PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

## SECTION I (1-3 MUST BE COMPLETED)

(Document numb	er of corporation (if known)				
	er or corporation (it known)				
EXP U.S. Services Inc.					
(Name of corporation as it appear	rs on the records of the Depa	rtment of State	2)		
Delaware	3. 04 / 04 / 2011 (Date author)				
(Incorporated under laws of)	(Date autho	orized to do bu	isiness in Fl	lorida)	
s	ECTION II				
(4-7 COMPLETE ONLY	THE APPLICABLE CHA	ANGES)			
If the amendment changes the name of the corporation, when with incorporation?		r the laws of it	s jurisdictio	on of	
(Name of corporation after the amendment, adding suffix "cornot contained in new name of the corporation)	poration," "company," or "in	corporated," c	or appropria	te abbi	eviation
(If new name is unavailable in Florida, enter alternate corporate	e name adopted for the purpe	se of transacti	ing business	s in Flo	ori <u>da)</u>
If the amendment changes the period of duration, indicate	new period of duration.		SESNUT TALLI	8- NUL E202	
4)	Sew duration)		AAY O	-8	
If the amendment changes the jurisdiction of incorporatio	n, indicate new jurisdiction.		SECHATARY OF STATE	M II : 32	Ö
(Ne	ew jurisdiction)			. •	
If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr Name of New Registered Agent	ddress in Florida, enter the	name of the	<del></del>		
(Florida	street address)				
New Registered Office Address:		, Florida_	(Zip Code,		
	City)		(Zip Code,	)	
New Registered Agent's Signature, if changing Registered	l Agent: miliar with and accept the ol.				

Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change: Type of Action Address Title/ Capacity <u>Name</u> Sr VP 2601 Westhall Lane Phil Stevens □Add Maitland, FL 32751 **☑**Remove 400 North Tampa St., Ste 1015 Anthony Caruso Sr VP ☑Add Tampa, FL 33602 Remove  $\square$ Add Remove Remove 0. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated. (Signature of director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) Hae-Jin (Priscilla) Ahn Secretary

FILING FEE \$35.00

(Title of person signing)

(Typed or printed name of person signing)