Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Rmail Address:

SECRETARY OF STATE DIVISION OF CORPORATION

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REGISTERED AGENT CHANGE XO GROUP INC.

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Corporate Filing Menu

Help

5/29/2013



COVER LETTER

TO:	Amendment Section Division of Corporations	
SUBJ	XO Group Inc.	
50D6.	Name of Corporation	
DOC	F12000003000 MENT NUMBER:	
The er	closed Statement of Change of Registered Office/Agent and fee are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Connie Chiang	
	Name of Contact Person	
	XO Group Inc.	
	Firm/Company	
	195 Broadway , 25th Floor	
Address		
	New York, NY 10007	
City/State and Zip Code		
	legal@xogrp.com	
	E-mail address: (to be used for future annual report notification)	
For fu	ther information concerning this matter, please call:	
Bree B	elmonte 212 590-9310	
	Name of Contact Person Area Code & Daytime Telephone Number	
Enclos	ed is a \$35.00 check made payable to the Department of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Street Address: Amendment Section Division of Corporations Clifton Building	
	Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

CR2E045 (03/12)

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

	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Delawate	
	order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name	of the corporation: XO Group Inc.	
2. The princip	ipal office address: 195 Broadway , 25th Floor, New York, NY 10007	
3. The mailin	ng address (if different):	—
4. Date of inc	corporation/qualification: 07/18/2012 Document number: F12000003000	
	and street address of the current registered agent and registered office on file with the epartment of State: (If resigned, enter resigned)	
	CORPORATION SERVICE COMPANY	
	1201 HAYS STREET	
	TALLAHASSEE, FL 32301-2525	8
6. The name of the changed		SECRE
	C T Corporation System	무 <u>주</u>
	c/o C T Corporation System, 1200 South Pine Island Road	8 8 8 7 7
	P.O. Box NOT acceptable	ည္သိလ
	Plantation, Florida 33324	ŽΞ
The street adas changed w	ddress of its registered office and the street address of the business office of its registered agent, will be identical.	
Such change authorized by	was authorized by resolution duly adopted by its board of directors or by an officer so by the board, or the corporation has been notified in writing of the change.	
121gr	patible of an officer or director Printed or typed name and title.	
I hereby acce I further agre performance agent. Or, if hereby confir	ept the appointment as registered agent and agree to act in this capacity. se to comply with the provisions of all statutes relative to the proper and complete of my dulies, and I am familiar with and accept the obligation of my position as registered fihis document is being filed merely to reflect a change in the registered office address, I rm that the corporation has been notified in writing of this change.	
By: C	Signature of Registered Agent Signature of Registered Agent	
If signing on	behalf of an entity:	
	Connie Bryan	
	Types 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
CR2E045 (03/12)