

F13000000859

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

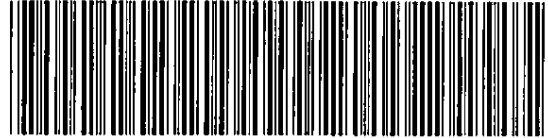
(Business Entity Name)

(Document Number)

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RECEIVED  
2023 SEP 28 PM 3:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2023 09 28


CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 954294 7539224

AUTHORIZATION :

COST LIMIT : \$ 35.00



ORDER DATE : August 24, 2023

ORDER TIME : 2:26 PM

ORDER NO. : 954294-075

CUSTOMER NO: 7539224

FOREIGN FILINGS

NAME: XOME INC.

XX CORPORATE  
       LIMITED PARTNERSHIP  
       LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Elyliena Baker -- EXT#

EXAMINER: \_\_\_\_\_

**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)**

7:59

F13000000859

(Document number of corporation (if known))

1. Xome Inc.  
(Name of corporation as it appears on the records of the Department of State)
2. Delaware 3. 2/25/2013  
(Incorporated under laws of) (Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? NA
5. \_\_\_\_\_  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)
- (If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) \_\_\_\_\_
6. If the amendment changes the period of duration, indicate new period of duration.  
NA  
(New duration)
7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.  
NA  
(New jurisdiction)
8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:  
NA
9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:  
\_\_\_\_\_

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP/Broker <input checked="" type="checkbox"/>	Thoma Hugh O'Leary	8950 Cypress Waters Blvd.	<input type="checkbox"/> Add
		Coppell, TX 75019	<input checked="" type="checkbox"/> Remove
Asst Sec <input checked="" type="checkbox"/>	Karen L. Robb	8950 Cypress Waters Blvd	<input type="checkbox"/> Add
		Coppell, TX 75019	<input checked="" type="checkbox"/> Remove
VP/Treas	Lola Akibola	8950 Cypress Waters Blvd.	<input checked="" type="checkbox"/> Add
		Coppell, TX 75019	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

10. 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.

*Andrea Conner*

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Andrea Conner

(Typed or printed name of person signing)

Vice President

(Title of person signing)

**FILING FEE \$35.00**