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## COVER LETTER

TO:	Registration Section		
	Division of Corporations		

Slobal XPO LLC
Name of Limited Liability Company SUBJECT:

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANCISCO QUINONEZ
Name of Person

GLOBAL XPO LLC Firm/Company

4624 SW 11 ST
Address

MIAMI FL 33134

FQM @ SUMIN-NIC. COM

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

For further information concerning this matter, please call:

FRANCISCO QUINONEZ at (786) 462-7265

Name of Person Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

#### **MAILING ADDRESS:**

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

## Enclosed is a check for the following amount:

□ \$25 Filing Fee

■ \$55 Filing Fee & Certified Copy

INHS18 (12/13)

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

· · · · · · · · · · · · · · · · · · ·	- 00010	
1. Name of the limited liability company:	BAL XPO LLL	
<ol> <li>(a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)</li> </ol>	4624 SW 11 ST MIAMI, FL 3313Y	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4624 SW 11 ST MIAM, FL 33134	
02 05 2013  3. Date of filing/registration in Florida	L 130000 18 289	
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dent of State	
	CAROLINA ROSALES	
Registered Agent:		
Registered Office Address:	4624 SW 11 ST MIAMI, FC 33134	
	2014	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	FRANCISCO QUINODEZ	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	4624 SW 11 5 1	
	MIRMI H 39134	
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Ficand the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of	
Signature of a member or authorized representative of a member		
Francisco Quinonez Printed or typed name of signee		
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proj and I am familiar with and accept the obligations of my post Chapter 605, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to wer and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.	
Signature of Registered Agent		
Division of Corporations, P.O. Box 632 FILING FEE: \$2;	•	

INHS18 (12/13)