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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: X-PEDITE ENVIRONMENTAL SERVICES, LLC
Name of Limited Liability Company

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:

Gary J. Mª Griff
Name of Person

X-PEDITE ENVIRONMENTAL SERVICES, LLC
Firm/Company

500 Magnolia Street

Address

Palatka Fle-32177

City/State and Zip Code

garyjmegriff@gmail-com

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

For further information concerning this matter, please call:

Gary J-ME Griff at (904) 444-2481

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

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1.	Na	ame of the limited liability company: X-PEDITE ENVIRONM	ENTAL SERVICES, LLC			
2.	(a)	Principal office address of limited liability company: Mai	ling address of limited liability company: Note: MAY BE POST OFFICE BOX			
		500 Magnolia St., 500 ma	agnolia St.			
			1 Ka Fla. 32177			
•			00178644			
3.		•	ocument number			
5.	(a)	Cary J. M. Cy-ff Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		500 Magnolia St- Registered Office Address (MUST BE FLORIDA STREET ADDRESS)	Zes _			
		500 Magnolia St.	CR A			
		Palatka. FL 32177	PR -5			
	(b)	Marion McGriff				
		Enter name of NEW Registered Agent and/or NEW Registered Office address:	7: 23			
		500 magnalia St.	e e e e e e e e e e e e e e e e e e e			
		500 Magnolia St. NEW Registered Office Address:				
		500 Magnolia st.				
		Palatka ,FL 32177				
the age wa	cha ent w s/we	limited liability company is not organized under the laws of the State of Florida ange or changes are made, the Florida street address of the registered office as will be identical. Or, in the case of a Florida limited liability company, it is here authorized by an affirmative vote of the members of the limited liability cicles of organization or the operating agreement of the limited liability compa	nd the business office of the registered ereby confirmed that the change(s) company or as otherwise provided in			
_		-12/11- Gary 5-1	NCG-74 rinted or typed name of signee			
I he to the not	erel ovisio obli mere ified	by accept the appointment as registered agent and agree to act in this capacitions of all statules relative to the proper and complete performance of my dutilizations of my position as registered agent as provided for in Chapter 605, For the property reflect a change in the registered office address, I hereby confirm that the din writing of this change.	ity I further garee to comply with the			
ខារ	Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314					

FILING FEE: \$25.00