2001	UNIFO	RM BUSI	NESS REPO	RT (UB	R)	•		
DOCUMENT # M0000002044 1. Entity Name XPO1 LLC						FILED		
			•		01	FEB 12 AM 9: 06		
Principal Place of Business 900 E. INDIANTOWN RD. STE 207 JUPITER FL 33477 Mailing Address 900 E. INDIANTOWN RD. STE 207 JUPITER FL 33477				STE 207	SE TAL	SECRETARY OF STATE TALLAHASSEE. FLORIDA		
11940	Place of Business US_HW\	lone	3. Mailing Address パタ40 ひち H	WY ON	e			
	200		Suite, Apt. #, etc. 576 200	e 200		DO NOT WRITE IN THIS SPACE		
City & Stat	alm Bea		N. Palm Bell	uh, FL	·	65-1038697		Applied For Not Applicable
3340		M Beach	33408	Palm B	<u>(ασγ</u> 5. c	ertificate of Status Desired ame and Address of New Reg	Fee Rec	Additional quired
		diess of Current N	egistered Agent	Name		ame and Address of New Neg	listerad Agent	
MASON, SUSAN S 900 E. INDIANTOWN RD, STE 207,				Street A	ddress (P.O. Bo	x Number is Not Acceptable)		
JUPITER	FL 33477	•		31	e 20	0		
·		·			Palm	Beach	FL Zip	£35408
8. The above	ramed entity submit	ts this statement for t						
SIGNATURÉ .	Mraly	name of squistred abentan	5	egistered office of the control of t	S. Ma	nt, or both, in the State of Floric Son instating)	da. 2	<u> </u>
SIGNATURE .	Mraly	blle	Stitle if applicable. (NOTE:	Registered Agent signal	S Ma rure required when rei	SO ()	da. Z 8 C DAE) [
9.	Signal Apparation	blle	FILE NO Make Check Pay	Pegistered Agent signal WIII FEE IS syable to Depart	S M a ture required when rei \$50.00 iment of State	SO () stating) ADDITIONS/C	Z/8/C	
-	Signal Apparation	camo ogresistado os ecuan	FILE NO Make Check Pay	Registered Agent signal W!!! FEE IS strable to Depart	S Ma S50.00 Iment of State MANAG SUSA 11940	ADDITIONS/CO	HANGES Cha	2200
9. TITLE NAME STREET ADDRESS	Signal Apparation	game of the list of a section	FILE NO Make Check Pay	Registered Agent signal WI!! FEE IS syable to Depart 10. TITLE NAME STREET ADDRESS	MANAGE SUSA	ADDITIONS/C ADDITIONS/C FING MEMBER N S. MASON US HWY DA M. BLACH, FL TR.	HANGES Cha	2 2 00 B Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signal Apparation	game of the list of a section	FILE NO Make Check Pay	Registered Agent signal W!!! FEE IS Syable to Depart 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGE SUSA	ADDITIONS/CO ADDITIONS/CO FING MEMBER N S. MASON US HWY DAY M Brach, H	HANGES Cha	2 200
9: TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signal Apparation	game of the list of a section	FILE NO Make Check Pay	Pegistered Agent Signal W!!! FEE IS STABLE TO Depart 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGE SUSA 11940 N. Poll MEMBE William	ADDITIONS/C ADDITIONS/C FING MEMBER N S. MASON US HWY DA M. BLACH, FL TR.	HANGES Cha STE ZO	2_00 3 unge Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signal Apparation	game of the list of a section	FILE NO Make Check Pay RS/MEMBERS Delete	Pegistered Agent signal W!!! FEE IS S Able to Depart 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE NAME	MANAGE SUSA 11940 N. Poll MEMBE William	ADDITIONS/OF ADDITIONS/OF MEMBERS MASON WS HWY DAS MEMBERS MEM	The Cha Cha	Addition Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	Signal Apparation	game of the list of a section	FILE NO Make Check Pay RS/MEMBERS Delete Delete	Registered Agent signal W!!! FEE IS S Able to Depart 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGE SUSA 11940 N. Poll MEMBE William	ADDITIONS/OF ADDITIONS/OF MEMBERS MASON WS HWY DAS MEMBERS MEM	Total Charles Charle	Addition Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signal Apparation	game of the list of a section	FILE NO Make Check Pay RS/MEMBERS Delete Delete	Registered Agent signal W!!! FEE IS S rable to Depart 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGE SUSA 11940 N. Poll MEMBE William	ADDITIONS/C ADDITIONS/C ING MEMBER N S. MASON US HWY DA M Brach, FL TR IM S. MASON US HWY ONC, N BROCK, FL	Total Charles Charle	Addition Addition Addition Addition Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: MASO! MASO! MASO! SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

CITY-ST-ZIP

2/8/0

561-776-0600

Daytime Phone #