M18 00000 8505

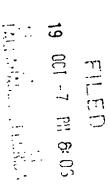
(Requestor's Name)				
(Address)				
, ,				
(Address)				
	(City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
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Office Use Only



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OCT 2 9 2019 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: X-Caliber Funding LLC	e of Limited Liability Company	
, van	company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
Michala Emple		
Michele Epple		
Name of Person		
X-Caliber Funding LLC		
Firm/Company		
3 W. Main Street Suite 103		
Address		
Irvington, NY 10533		
City/State and Zip Code		
Michele.Epple@X-calibercap.co	om	
E-mail address: (to be used for future annu		
For further information concerning this matter.	please call:	
Michele Epple	_ at (914 <u>)</u> 815-9805	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following	amount:	
☑ \$25 Filing Fee	\$55 Filing Fee & Certified Copy	

INHS18 (2/14)

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	une of the limited liability company: X-Caliber f	Funding Ll	_C
2. (a)		(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3 W. Main Street Suite 103	3 W	/. Main Street Suite 103
	Irvington, NY 10533		gton, NY 10533
	September 17, 2018	M18	000008505
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	CT Corporation System		
(4)	Registered Agent and Registered Office shown on the records of	the Florida Dept. o	of State:
	1200 South Pine Island Road		2 5
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	FILED BY 06
		· · · · · · · · · · · · · · · · · · ·	
	Plantation, FL	33324	= 0
	Registered Agents Inc.		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	<u> </u>
		THIS HOUSE TO	
	7901 4th St N		
	NEW Registered Office Address:		
	STE 300		
	St. PetersburgFI.	33702	
the cha agent v	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liability.	f the registered of ability company	office and the business office of the registered v. it is hereby confirmed that the change(s)
was/we the arti	ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	of the limited lia limited liability	ability company or as otherwise provided in your company.
	ATTAL	Sharon Ca	allahan
Sign	tire of amember or authorized representative of a member		Printed or typed name of signee
provisi the obl to mere notified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address. It is writing of this change. Bill Havre - Assistan	performance of d for in Chapter hereby confirm	f my duties, and Lam familiar with and accept
احمل	re of Registered Agent	it Secretary	