## Pó4000157266

DIVISION OF CORPORATIONS
2005 JUL 1 PM

- K+ M TRUCKING 8321 Brandon Rd - Panama City FL 32404
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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RA Chg. No No

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: XYM TRUCKING, INC.
2. The principal office address: 8321 Brandon Road Panama City Florida 32404
3. The mailing address (if different):
4. Date of incorporation/qualification: 11/18/2004 Document number: Po 4 000 157266
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
Resigned !
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Bobby C. McMurphy
8321 Brandon Road (PO Box NOT acceptable)
Panama City FLorida 32404
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Bobby C MEMURPHY  (Signifier of this of Director)  Bobby (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Holly C MM 1 7-7-05  (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*