

P05000057410

2017-07-24 08:30:55 CST

9542680845 From: Raabe McGraw

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (950) 617-6380

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614) 280-3338
Fax Number : (954) 208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

REGISTERED AGENT CHANGE
XATOR CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	04
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: XATOR CORPORATION

Name of Corporation

DOCUMENT NUMBER: P05000057410

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Susan Dixon

Name of Contact Person

XATOR CORPORATION

Firm/Company

1835 Alexander Bell Drive, Ste. 210

Address

Reston, VA 20191

City/State and Zip Code

susan.dixon@xatorcorp.com

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

For further information concerning this matter, please call:

Name of Contact Person

at (_____) _____

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR215045 (03/12)

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1568, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: XATOR CORPORATION
2. The principal office address: 1835 Alexander Bell Dr., Ste 210
Reston, VA 20191-4324
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 4/14/2005 Document number: P05000057410
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

JERRY PFEIFFER

543 Harbor Blvd., STE 501

DESTIN, FL 32541

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

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.


Signature of an officer or director

Leslie Martin
Vice President

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.

By: Maria T. Chambers
Signature of Registered Agent

7/24/17
Date

If signing on behalf of an entity:

Maria T. Chambers
Special Assistant Secretary

Typed or Printed Name

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

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

CR2E045 (03/12)

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DIVISION OF CORPORATIONS
2017 JUL 24 PM 4:19

Power of Attorney

NOTICE IS HEREBY GIVEN THAT XATOR CORPORATION ("Company"), a Corporation Incorporated under the laws of Florida, does hereby appoint Christine Rein, Kelly Lettmann, Michelle Donato, Mandy Hendricks, Dareth Jeffers, Alan Stachura, Nicole Parnell, Sarah Revelle, Ryan Nelson, Ryan Maher, Natalie Pickens, Michelle Buchheit, Jessica Molloy, Jeremy Puentes, Lars Fox, Matthew Sawyer, Shannon Diamond, JoAn Tolosa, Adam Steimel, Brad Stenker, Leah Griffin, Lauren Miller, Stacey Busch, Tony Spain, Shanna Loness, Col'n Giles, Tammy Tofteroo, April Wittenwyler, Jamila Woods, Eleanor Puls, Cardell Rankin, Jennifer Vincent, Maria Sciotti, Kimberly Steinmetz, Scott White, Susan McCraney, Cristina Lam, Leslie Martin, Alishia L'Heureux, Terence Hardely, Terrell Kearney, Jessica Eisele, Denise Bell, Thomas Anderson, Kimberly Bowens, Anthony Kellerman, and Sierra Burris (but only for so long as each of them, respectively, remains an employee of CT Corporation or an affiliate thereof) as attorney-in-fact for the Company to act for the Company and affiliates and subsidiaries of the Company attached hereto as Exhibit A, specifically incorporated herein by reference ("the Subsidiaries") in the Corporation and Subsidiaries' names for the limited purposes authorized herein.


The Corporation and Subsidiaries hereby grants its attorney-in-fact the power to execute the documents necessary to file annual reports, annual registrations, license renewals, change entities' registered agent and registered office, and forms of similar import on behalf of the Corporation and Subsidiaries in any state and the District of Columbia.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, Tammy Tofteroo, April Wittenwyler, Jamila Woods, Eleanor Puls, Cardell Rankin, Jennifer Vincent, Maria Sciotti, Kimberly Steinmetz, Scott White, Susan McCraney, Cristina Lam, Leslie Martin, Alishia L'Heureux, Terence Hardely, Terrell Kearney, Jessica Eisele, Anthony Kellerman, Denise Bell, Thomas Anderson, Kimberly Bowens and Sierra Burris shall exercise the power of Vice President, Secretary, Manager, and/or Member.

This Power of Attorney expires when revoked by the Corporation or Subsidiaries.

IN WITNESS WHEREOF the undersigned have executed this Power of Attorney on the

8th day of June 2017
Date Month Year


Signature

Matthew P. Galaski, CFO
Name, Title

Sworn to and subscribed before me
this 8th day of June 2017
Date Month Year


Signature of Notary

Notary Public, State of VA
State

Commission Expires: 6/30/2020
MM/DD/YYYY

