P07000074155

(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:

Office Use Only



900134137539

RACLEOSE

08/11/08--01009--028 **35.00



18/14/08

COVER LETTER

Division of Corporations
SUBJECT: XF CORPORATION (Name of Corporation)
(Maine of Corporation)
DOCUMENT NUMBER: P07000074155
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:
JOHN PRISCO
(Name of Contact Person)
XF CORPORATION
(Firm/Company)
10509 NORTH NEBRASKA AVENUE UNIT #3 (Address)
TAMPA, FLORIDA 33647 (City/State and Zip Code)
For further information concerning this matter, please call:
JOHN PRISCO at (813) 766-8736 (Name of Contact Person) (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 Tallahassee, FL 32314 Z661 Executive Center Circle Tallahassee, FL 32301

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of FLORIDA in the State of Florida.
1. The name of	the corporation: XF CORPORATION
2. The principal	office address: 10509 NORTH NEBRASKA AVENUE UNIT #3 ORIDA 33647
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 06-27-08 Document number: P07000074155
	I street address of the current registered agent and registered office on file with the thent of State:
	ROBERT WARCHOLA
	101 E KENNEDY BLVD SUITE 2800
	TAMPA, FLORIDA 33602
6. The name and (if changed):	TAMPA, FLORIDA 33602 street address of the new registered agent (if changed) and /or registered office. JOHN PRISCO
	JOHN PRISCO
	10509 NORTH NEBRASKA AVENUE UNIT #3
	(P.O. Box NOT acceptable)
	TAMPA, FLORIDA 33647
The street address changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so be board, or the corporation has been notified in writing of the change.
John	JOHN PRISCO, PRESIDENT (Printed or typed name and title)
I hereby accept I further agree to of my duties, an document is beil corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of all statutes relative to the proper and complete performance of a lambda accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
Johns	thature of Registered Agent) Quality 7, 2008 (Uate)
It signing on be	half of an entity:
Τ)	yped or Printed Name) .

****FILING:FEE: \$35:00-*-*-*