

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000036301

**Entity Name:** X+O, LLC

**Current Principal Place of Business:**

20533 BISCAYNE BLVD  
STE 4  
AVENTURA, FL 33180

**Current Mailing Address:**

20533 BISCAYNE BLVD  
STE 4  
AVENTURA, FL 33180 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS, INC  
3030 N ROCKY POINT DR  
STE 150A  
TAMPA, FL 33607 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** BILL HAVRE

04/30/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AUTHORIZED REPRESENTATIVE  
Name            LAROCCO, STEFFANIE  
Address        20533 BISCAYNE BLVD  
                  STE 4  
City-State-Zip: AVENTURA FL 33180

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** STEFFANIE LAROCCO

**AUTHORIZED  
REPRESENTATIVE**

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date