414 DEKALE	B ST			
NORRISTO	WN, PA 19401 US			
FEI Number: 80-0461329			Certificate of Status Desired: No	
Name and A	Address of Current Registered Age	nt:		
LICENSES, ET 27911 CROWN				
SUITE 211 BONITA SPRIN	NGS, FL 34135 US			
BONITA SPRIN	IGS, FL 34135 US d entity submits this statement for the purpose of cha	anging its registered office or regis	tered agent, or both, in the State of F	lorida.
BONITA SPRIN		anging its registered office or regis	tered agent, or both, in the State of F	ilorida. 03/15/2023
BONITA SPRIN	d entity submits this statement for the purpose of cha	anging its registered office or regis	tered agent, or both, in the State of F	
BONITA SPRIN The above named SIGNATURE	d entity submits this statement for the purpose of cha E: TODD BABBIT	anging its registered office or regis	tered agent, or both, in the State of F	03/15/2023
BONITA SPRIN The above named SIGNATURE	d entity submits this statement for the purpose of chances of the purpose of chances of the purpose of chances of the purpose	anging its registered office or regis	tered agent, or both, in the State of F	03/15/2023
BONITA SPRIN The above named SIGNATURE Officer/Dire	d entity submits this statement for the purpose of characteristic terms of the purpose of characteristic terms of the purpose of characteristic terms of the purpose of the purpose of characteristic terms of the purpose of the purpose of characteristic terms of the purpose of			03/15/2023
BONITA SPRIN The above named SIGNATURE Officer/Dire Title	d entity submits this statement for the purpose of char E: TODD BABBIT Electronic Signature of Registered Agent ctor Detail : PRESIDENT	Title	S/T	03/15/2023

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN TAHTABROUNIAN

PRESIDENT

03/15/2023

Electronic Signature of Signing Officer/Director Detail

## DOCUMENT# P09000068035

Entity Name: XAVIER BUILDERS, INC.

## **Current Principal Place of Business:**

414 DEKALB ST NORRISTOWN, PA 19401

## **Current Mailing Address:**

FILED Mar 15, 2023 Secretary of State 2601357288CC

Date