

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000165870 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : 120020000144 Phone : (305)520-2344 Fax Number : (305)520-2400

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

Email	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ALL ABOARD FLORIDA - OPERATIONS LLC

RECEIVED JUN 0 1 2018

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: All Aboard Florida - O	perations LLC	
Name of Foreign Li	mited Liability Company	
Dear Sir or Madam:		
The enclosed application, certificate and fee(s) are	submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
Kolleen Cobb		
Name of Person		
Florida East Coast Industries,	LLC	
Firm/Company		
2855 Le Jeune Rd, 4th Floor		
Address		
Coral Gables, FL 33134	**************************************	
City/State and Zip Code		
kolleen.cobb@feci.com		
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, ple		
Jessica Perez	(305) 520-2366	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount: \$\begin{align*}	S55 Filing Fee & S60 Filing Fee, Certified Copy Certificate of Status & Certified Copy	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Enter new principal office address, if applicable				
Enter new principal office address, if appricable			ే	
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)				
Enter new mailing address, if applicable:				
(Mailing address			جي َ	
MAY BE A POST OFFICE BOX				
2. The Florida document number of this limited	liability company is: M0700	0007319	90	
3. Jurisdiction of its organization: Delaware	2/19/2007			
4. Date authorized to do business in Florida: 1	2/10/2001			
execution II (6.0 complete only the applicable	le changes)			
5. New name of the limited liability company:	Brightline Trains LLC		C5	
(m	nust contain "Limited Liability C	Jompany, " "L.E.C.	, or <u></u>	
(If name unavailable, enter alternate name adoptions of the written consent of the managers or must contain "Limited Liability Company," "L.	manaoine members adoittiile liit	ig business in Flori e alternate name. Th	da and attach a he alternate name	
6. If amending the registered agent and/or regist	tered officer address on our reco	ords, enter the name	of the new	
registered agent and/or the new registered office	e address here:	9	13	
Name of New Registered Agent:				
New Registered Office Address:	Enter Flo	rida Street Address	·	
-	City	Florida	Zip Code	
	ŕ			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a the provisions of all statutes relative to the projud accept the obligations of my position as reg	igent and agree to act in this cap ner and complete performance (oj my auties, ana 1 c n Chapter 605. F.S.	am jamutar wan. Or, if this	

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:							
Title/ Capacity	Name	Address	Type of Action				
			Add				
			Remove				
							
			Remove				
			Add Remove				
			Add				
			Remove				
			Add				
			Remove				
aforementioned an	the law of which this entity is or	by the official having custody of record	ls in the				

Filing Fee: \$25.00

From:

State of Delaware
Secretary of State
Division of Corporations
Delivered 05:13 PM 05:30:2018
FTLED 05:13 PM 05:30:2018
SR 20184635692 - File Number 4473701

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

- 1. Name of Limited Liability Company: All Aboard Florida Operations LLC
- 2. This Certificate of Formation of the limited liability company is hereby amended as follows:

FIRST: The name of the limited liability company is Brightline Trains LLC

IN WITNESS WHEREOF, the undersigned have executed this Certificate on 20th day of May, 2018.

All Aboard Florida - Operations LLC

y: ______

de/President