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.

Electronic Filing Cover Sheet

(((H180002069653)))



H180002069853ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20026000144 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:_____

2

COR AMND/RESTATE/CORRECT OR O/D RESIGN FECI HOLDING CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Rolchg

JUL 18 2018

I ALBRITTON

Electronic Filing Menu

Corporate Filing Menu

Help

07/17/2018 3:17:07 PM FAXCOM Anywhere

PAGE 3 OF 5

650-617-6381

7/11/2018 10:11:40 AM PAGE 1/001 Fax Server



July 11, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

PECI HOLDING CORP. 2855 LEJEUNE RD, 4TE FLOOR CORAL GABLES, FL 33134

SUBJECT: FECI HOLDING CORP.

REP: F07000006341

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing gover sheet.

The electronic filing covar sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filing, please also send a copy of the incorrect cover sheet marked "ABANDONED".

It appears you wish to change the principal and registered agent address. If so please submit the statement of change of registered office or registered agent or both for a Foreign corporation as the form submitted is the wrong form.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

FAX Aud. #: E18000185269 Letter Number: 118A00014242

RECEIVER

18 JUL 17 PM 4: 01

SECRETARY OF A 2: 01

ALLAHASSER FOR A 2: 01

P.O BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: FECI Holding Corp.

Name of Corporation

POCIDENT NAMED F0700006341

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

Please return all correspondence concerning this marter to the following:

Kolleen Cobb

Name of Contact Person

Florida East Coast Industries, LLC

Finn/Company

117 NE 1st Avenue, 11th Floor

Address

Miami, FL 33132

City/State and Zip Code

kolleen.cobb@feci.com

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

For further information concerning this matter, please call:

Brianna Hernandez

305 ,520-.

Name of Contact Person

Arca 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 Tallahassec, FL 32301

CRZE045 (03/12)

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

statement of ch	e provisions of sections 607.0502, 617.0502, hange is submitted for a corporation organize der to change its registered office or registore	ed under the laws of the State o	Delaware
I. The name of	f the corporation: FECI Holding Corp) ,	
2. The principa	al office address: 117 NE 1st Avenue	, 11th Floor, Miami, f	L 33132
3. The mailing	address (if different):		
4. Date of inco	orporation/qualification: 12/28/2007	Document number: F 076	000006341
The name an Florida Depart	nd street address of the current registered ages artment of State: (If resigned, enter resigned)	nt and registered office on file	with the
	Cobb, Kolleen O.P.		
	117 NE 1st Avenue, 11th Floo		-
	Coral Gables, FL 33134		78. 1A
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or registered (SECRIETARI TALLAHASS
	Cobb, Kolleen O.P.		
	117 NE 1st Avenue, 11th Floo		TOP B
	P.O. Box NOT see	entable	92
	Miami, FL 33132		Pr
The street addrass changed wil	tress of its registered office and the street add If be identical.	dress of the business office of	its registered agent,
Such change wanthorized by t	was authorized by resolution duly adopted by board, or the corporation has been notifi	its board of directors or by an ed in writing of the change.	n officer so
V sector.	A College	Kolleen O.P. Cobb, Vi	ce President
•	of the appointment as registered agent and a to comply with the provisions of all statute of my duties, and I am familiar with and acco his document is being filed merely to reflect in that the corporation has been notified in w	Littles of Sherr Herric High	11176
Sig	ignature of Registered Agent	Date	
lf signing on be	pehalf of an entity:		
' i	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)