

D95000000007

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

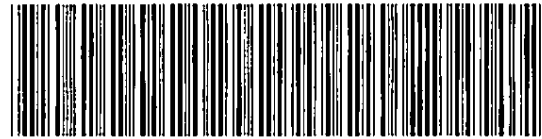
(Document Number)

Copies _____

Certificates of Status _____

Additional Instructions to Filing Officer:

Office Use Only



500402808805

Amend to declaration
to Trust

FILED
2023 FEB 16 AM 11:17

RECEIVED
2023 FEB 16 PM 4:22
DIRECTOR'S OFFICE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

A. RAMSEY

FEB 17 2023

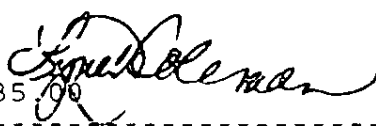
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 499660 4305026

AUTHORIZATION :

COST LIMIT : \$ 35.00



ORDER DATE : February 14, 2023

ORDER TIME : 1:37 PM

ORDER NO. : 499660-015

CUSTOMER NO: 4305026

FOREIGN FILINGS

NAME: SERVICE PROPERTIES TRUST

XX TRUST
 LIMITED PARTNERSHIP
 LIMITED LIABILITY COMPANY

XXXX AMENDMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER: _____

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Service Properties Trust

Name of Corporation

DOCUMENT NUMBER: D95000000007

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rachael Charest

Name of Contact Person

Sullivan & Worcester LLP

Firm/Company

One Post Office Square

Address

Boston, MA 02109

City/State and Zip Code

rcharest@sullivanlaw.com

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

For further information concerning this matter, please call:

Rachael Charest

at (617) 338-2868

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

APPLICATION BY FOREIGN

**Declaration of Trust TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

(Pursuant to s. 609.2 .)

2023 FEB 16 AM 11:18

**SECTION I
(1-3 MUST BE COMPLETED)**

D95000000007

(Document number of trust . (if known)

1. Service Properties Trust

(Name of trust as it appears on the records of the Department of State)

2. Maryland

3. 05/26/1995

(Incorporated under laws of)

(Date authorized to do business in Florida)

**SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? _____

5. _____

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

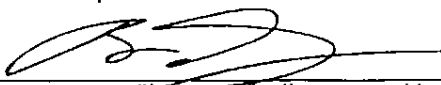
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
	Please see Exhibit A attached		☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☒ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.


 (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Brian E. Donley
 (Typed or printed name of person signing)

Chief Financial Officer and Treasurer
 (Title of person signing)

FILING FEE \$35.00

Exhibit A

Name	Title	Address	Add / Remove
Gerard M. Martin	TP	400 Centre Street, Newton, MA 02158	Remove
John G. Murray	ST	400 Centre Street, Newton, MA 02158	Remove
Barry M. Portnoy	T	One Post Office Square, Boston, MA 02109	Remove
Todd W. Hargreaves	President and Chief Investment Officer	Two Newton Place 255 Washington St., Suite 300 Newton, MA 02458	Add
Brian E. Donley	Chief Financial Officer and Treasurer	Two Newton Place 255 Washington St., Suite 300 Newton, MA 02458	Add
Jennifer B. Clark	Secretary	Two Newton Place 255 Washington St., Suite 300 Newton, MA 02458	Add
Jacquelyn S. Anderson	Assistant Secretary	Two Newton Place 255 Washington St., Suite 300 Newton, MA 02458	Add
John G. Murray	Trustee	Two Newton Place 255 Washington St., Suite 300 Newton, MA 02458	Add
Adam D. Portnoy	Trustee	Two Newton Place 255 Washington St., Suite 300 Newton, MA 02458	Add