## 2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M0000001058

## Entity Name: AMERICAN MESSAGING SERVICES, LLC

# **Current Principal Place of Business:**

1720 LAKEPOINTE DR. SUITE 100 LEWISVILLE, TX 75057

## **Current Mailing Address:**

1720 LAKEPOINTE DR. SUITE 100 LEWISVILLE, TX 75057 US

### FEI Number: 22-3724253

### Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	HOPKINS, THOMAS J.	Name	GINERIS, MARC
Address	C/O COLCHESTER CAPITAL 121 SUMMIT AVENUE SUITE 210	Address	C/O INCYTE CAPITAL PARTNERS, LLC 2911 TURTLE CREEK BLVD SUITE 300
City-State-Zip:	SUMMIT NJ 07902	City-State-Zip:	DALLAS TX 75219
		City-State-Zip.	DALLAS IX 75219
Title	MANAGER		
Name	POTTLE, J. ROY		
Address	1720 LAKEPOINTE DR. SUITE 100		
City-State-Zip:	LEWISVILLE TX 75057		

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: J. ROY POTTLE

MANAGER

04/02/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Apr 02, 2018 Secretary of State CC9627355103

Certificate of Status Desired: No