

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000017459

Entity Name: AMR GP HOLDINGS, LLC**Current Principal Place of Business:**3805 WEST CHESTER PIKE STE 240
NEWTOWN SQUARE, PA 19073**Current Mailing Address:**3805 WEST CHESTER PIKE STE 240
NEWTOWN SQUARE, PA 19073 US**FEI Number:** 82-5330449**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC
115 NORTH CALHOUN ST. STE 4
TALLAHASSEE, FL 32301 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:** KAREN MCKEOWN

03/08/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title ASST SEC
Name SHADE, CORY
Address 3805 WEST CHESTER PK STE 240
City-State-Zip: NEWTOWN SQUARE PA 19073

Title VP
Name JORSKI, HELEN D
Address 3805 WEST CHESTER PK STE 240
City-State-Zip: NEWTOWN SQUARE PA 19073

Title P
Name DEL PEON, GONZALO
Address 3805 WEST CHESTER PK STE 240
City-State-Zip: NEWTOWN SQUARE PA 19073

Title SEC
Name COLL, FRANCISCO J
Address 3805 WEST CHESTER PK STE 240
City-State-Zip: NEWTOWN SQUARE PA 19073

Title VP
Name REYNOLDS, NANETTE C
Address 3805 WEST CHESTER PK STE 240
City-State-Zip: NEWTOWN SQUARE PA 19073

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: CORY SHADE**ASSISTANT SECRETARY** 03/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date