

007000000011

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

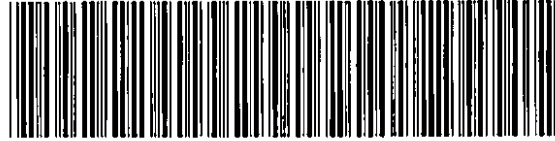
(Business Entity Name)

(Document Number)

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STATE  
ADVISE FL

2021 JAN 13 PM 2:19

2021 JAN 13 AM 8:46

RECEIVED

FILED

RECEIVED  
JAN 27 2021

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

ACCOUNT NO. : I20000000195

REFERENCE : 613407 4305026

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$35.00

ORDER DATE : January 13, 2021

ORDER TIME : 12:27 PM

ORDER NO. : 613407-025

CUSTOMER NO: 4305026

FOREIGN FILINGS

NAME: HPT PSC PROPERTIES TRUST

XX CORPORATE  
       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: Amanda Robinson -- EXT# 62968

EXAMINER: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations



January 25, 2021

CSC

**RESUBMIT**

Please give original  
submission date as file date.

SUBJECT: HIGHWAY VENTURES PROPERTIES TRUST  
Ref. Number: D0700000011

We have received your document for HIGHWAY VENTURES PROPERTIES TRUST and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Declaration of trust must be under chapter 609. Please change the statute number

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Yasemin Y Sulker  
Regulatory Specialist III

Letter Number: 421A00000920

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: **HPT PSC Properties Trust**

Name of Corporation

DOCUMENT NUMBER: **D07000000011**

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

(Pursuant to s. 609.1504, F.S.)

D07000000011

**HPT PSC Properties Trust**

3 Maryland

05/29/2007

(Date authorized to do business in Florida)

## Highway Ventures Properties Trust

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

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

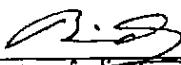
8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

9. If the amendment changes person, title or capacity in accordance with 609 1504 (4), indicate that change:

Yes

<u>Title/Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
PT	Edward Escudero	6080 SURETY DRIVE	<input type="checkbox"/> Add
		EL PASCO, TX 79905	<input checked="" type="checkbox"/> Remove
TST	Lisa Budtke	6080 SURETY DRIVE	<input type="checkbox"/> Add
		EL PASCO, TX 79905	<input checked="" type="checkbox"/> Remove
President & CEO	John G. Murray	Two Newton Place, 255 Washington Street	<input checked="" type="checkbox"/> Add
		Newton, MA 02458	<input type="checkbox"/> Remove
CFO & Treasurer	Brian E. Donley	Two Newton Place, 255 Washington Street	<input checked="" type="checkbox"/> Add
		Newton, MA 02458	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> 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 & Treasurer _____ (Title of person signing)
---	---

**FILING FEE \$35.00**

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