## F10 0000004973

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	• • • • • • • • • • • • • • • • • • •
SUBJE	ECT: Ameris Bancorp Inc.	
Name	of Corporation	
DOCU	MENT NUMBER: F10000004973	
The en	closed Statement of Change of Registere	d Office/Agent and fee are submitted for filing.
Please	return all correspondence concerning thi	s matter to the following:
Richen	e Oliver	
Name	of Contact Person	<del></del>
Adams	and Reese LLP	
Firm/C	ompany	
501 Riv	verside Avenue, Suite 601	
Addres	SS	<del></del>
Jackson	wille, FL 32202	
City/St	ate and Zip Code	<del></del>
	richene.oliver@arlaw.com	
E-mai	l address: (to be used for future annua	l report notification)
For fur	ther information concerning this matter,	please call:
Richen	e Oliver	at (904 )355-1700  Area Code & Daytime Telephone Number
	Name of Contact Person	Area Code & Daytime Telephone Number
Enclos	ed is a \$35.00 check made payable to the	e Department of State.
	Mailing Address: Amendment Section	Street Address: Amendment Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327	The Centre of Tallahassee
	Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

۵.

CR2E045 (04/13)

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

statement of cha	nge is submitted for a corporation organi	2, 607.1508, or 617.1508, Florida Statutes, ized under the laws of the State of Georgia red agent, or both, in the State of Florida.	this
1. The name of t	the corporation: Ameris Bancorp Inc.		
	office address: 3490 Piedmont Road NE, St	uite 1550, Atlanta, GA 30305	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 11/15/2010	Document number: F10000004973	
	I street address of the current registered ag tment of State: (If resigned, enter resigned		
	Lawton E. Bassett III		
	1301 Riverplace Boulevard, Suite 2600		
	Jacksonville, FL 32207	SECR	ت ر 2020 ت
6. The name and (if changed):	d street address of the new registered agen	t (if changed) and /or registered office ARY (	7 1 L C U
	C T Corporation System		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	1200 South Pine Island Road P.O. Box	NOT acceptable	52
	Plantation, FL 33324	<u> </u>	
The street address changed will	ess of its registered office and the street a be identical.	address of the business office of its registe	ered agent.
Such change wa authorized by th	as authorized by resolution duly adopted ne board, or the corporation has been not	by its board of directors or by an officer lifted in writing of the change.	so
Line	di Lewis	Cindi Lewis , Corporate Secretary	
	re of an officer or director	Printed or typed name and title	
I further agrée of my duties, an document is bei	id Lam familiar with and accept the obli	agree to act in this capacity.  Ites relative to the proper and complete p  gation of my position as registered agent.  registered office address, I hereby confi	. (Jr. 11 inis
4-23	Rose Song, Assistant Secretary	7.17.2020	
Sig	nature of Registered Agent	Date	
If signing on be	shalf of an entity:		
_ <del></del>	yped or Printed Name		

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)

\* \* \* FILING FEE: \$35.00 \* \* \*