Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FLAGLER DEVELOPMENT GROUP, LLC

Account Number : I20020000144 Phone : (305)520-2344 Fax Number : (305)520-2400

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:______

SEP-8 PM 3: 1

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VIRGIN TRAINS USA FLORIDA LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

SEP 09 2020

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Virgin Trains USA Flo			
•	Limited Liaou	ny Compa	шy
Dear Sir or Madam:			
The enclosed application, certificate and fee(s) ar	e submitted fo	r filing.	
Please return all correspondence concerning this	matter to the fo	ollowing:	
Kolleen Cobb			
Name of Person			
Firm/Company			20
700 NW 1st Avenue, Suite 1	620		70.807
Address			
Miami, FL 33136			
City/State and Zip Code			
kolleen.cobb@feci.com			
E-mail address: (to be used for future annual re	eport notificati	on)	
For further information concerning this matter, p	lease call:		
Jessica Perez	at (305	520-2	2366
Name of Person	Area Code	& Daytim	e Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations		Registra Division	ING ADDRESS: ation Section n of Corporations ox 6327
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301			ssec, Florida 32314
Enclosed is a check for the following amount: S25 Filing Fee S30 Filing Fee & Certificate of Status	S55 Filin Certified	-	S60 Filing Fee, Certificate of Status & Certified Copy

OccuSign Envelope ID: 7388DB28-48EF-4747-85AE-08996430D8F2

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Comp	• • •		ds of the Florida D	epartment of	
State: Virgin Trains US.	A Florida LL	.C			
Enter new principal office address	, if applicable:		<u>.</u>		
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>	צא		· · · · · · · · · · · · · · · · · · ·		20 SEP -8
Enter new mailing address, if appl (Mailing address MAYBE A POST OFFICE BOX)				-6 WHO: 15
2. The Florida document number of	of this limited liab	oility compa	my is: M070000	007319	
3. Jurisdiction of its organization:					
4. Date authorized to do business	in Florida: 12/	18/2007			
SECTION II (5-9 complete only 5. New name of the limited liability	ity company: <u>Bi</u> (must	rightline contain "Li			
(If name unavailable, enter alternations of the written consent of the must contain "Limited Liability C	managers or man	aging memb	ers adopting the alt	usiness in Florida ar ternate name. The al	nd attach a ternate name
6. If amending the registered agen registered agent and/or the new re	gistered office ad	<u>dress here:</u>	lress on our records	, enter the name of t	<u>he new</u>
Name of New Registered Agent:	Cynthia Be	rgmann			
New Registered Office Address:	161 NW 6t	n Street,			<u></u>
	A 4:	- mai	Enter Florida	a Street Address	26
	<u> </u>	ami ———	City	, Florida <u>3313</u> 	
New Registered Agent's Signature I hereby accept the appointment of the provisions of all statutes related and accept the obligations of my document is being filed to merely liability company has been notified	is registered ager ive to the proper position as registe reflect a change d in writing of th	nt and agree and complet ered agent a in the regist is change.	nt: to act in this capac e performance of n s provided for in C ered office address, Docusigne	rity. I further agree t ny duties, and I am fo hapter 605, F.S. Or, I hereby confirm th	o comply with amiliar with if this at the limited

DocuSign Envelope ID: 73B8DB28-48EF-4747-85AE-0B996430D8F2

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1 Xe), indicate that change:						
Fitle/ Capacity	<u>Name</u>	Address	Type of Action			
			Remove			
		 	Add			
			Remov			
			Add			
			Remove			
			Add			
			Remove			
			Add			
aforemention	certificate, if required: no more than ned amendment(s), duly authenticated ander the law of which this entity is or	by the official having custody of rec	Remove			

Typed or printed name of signee

State of Delaware
Secretary of State
Division of Corporations
Delivered 01:09 PM 08/31/2020
FILED 01:09 PM 08/31/2020
SR 20207023478 - File Number 4473701

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

- 1. Name of Limited Liability Company: Virgin Trains USA Florida LLC
- 2. This Certificate of Formation of the limited liability company is hereby amended as follows:

FIRST: The name of the limited liability company is <u>Brightline Trains Florida LLC</u>

IN WITNESS WHEREOF, the undersigned have executed this Certificate on 31⁶⁺ day of <u>August</u>, 2020.

Virgin Trains USA Florida LLC

Kolleen O.P. Cobb

Vice President