M 1000000 3988

(Re	equestor's Name)			
(Ac	ddress)			
(Ad	ddress)			
-				
(City/State/Zip/Phone #)				
. PICK-UP	☐ WAIT	MAIL		
(Bi	usiness Entity Nar	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
				
Special Instructions to Filing Officer:				
11100				
<u> </u>	055			
	Office Use On	Iγ		



400286932044

06/27/16--01022--011 **30.00

PILED 2018 32 -1 P 4: 26 :

S Warren JUL 0 5 2016



June 29, 2016

JESSE T. SMITH 4001 MAPLE AVE, SUITE 600 DALLAS, TX 75219

SUBJECT: AMELIA ISLAND REAL ESTATE SERVICES, LLC

Ref. Number: M1000003988

We have received your document for AMELIA ISLAND REAL ESTATE SERVICES, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This form is no longer used please use the form enclosed

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) 245-6051.

Letter Number: 116A00013758

Stacey M Warren Regulatory Specialist II

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Amelia Island Real Estate Services, LLC

Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jesse T. Smith

Name of Person

TRT Holdings

Firm/Company

4001 Maple Ave. Ste. 600

Address

Dallas, Texas 75219

City/State and Zip Code

it.smith@trtholdings.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jesse T. Smith

at (214)283-8649
Area Code and Daytime Telephone Number

Name of Person

STREET/COURIER ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

Enclosed is a check for the following amount:

□\$25 Filing Fee

\$30 Filing Fee & Certificate of Status

☐ \$55.00 Filing Fee & Certified Copy

☐ \$60 Filing Fee. Certificate of Status & Certified Copy

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 Company as it appears	s on the records of the Florida Department of		2
State: Amelia Island Real Estate S	Services, LLC		100 100 100 100 100 100 100 100 100 100
State.			
Enter new principal office address, if applicable:		50.25	
(Principal office address		(TO	
MUST BE A STREET ADDRESS)		E S	-0-
		8¥	
		ᅙᅼ	26
Enter new mailing address, if applicable:			-
(Mailing address	•		
<u>MAY BE A POST OFFICE BOX)</u>			
0.70	M1000003988		
2. The Florida document number of this limited lia	bility company is:		
3. Jurisdiction of its organization: Delaware			
4. Date authorized to do business in Florida: Sep	ptember 9, 2010		· · · · · · · · · · · · · · · · · · ·
SECTION 11 (5-9 complete only the applicable of	changes)		
New name of the limited liability company:			
(must	t contain "Limited Liability Company," "L.I.	C.," or	LLC.")
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or mar must contain "Limited Liability Company," "L.L.C	naging inembers adopting the alternate name.	orida and . The alter	attach a nate name
If amending the registered agent and/or registere registered agent and/or the new registered office ac	nd officer address on our records, enter the naddress here:	ime of the	: new
Name of New Registered Agent:			
New Registered Office Address:			
The strength of the strength o	Enter Florida Street Addr	ess	
	Florida		
	City	Zip Co	de

New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

tle/ Capacity	Name	, <u>Address</u>	Type of Actio
Director Tricia Ve	Tricia Veres	39 Beach Lagoon Road, Amelia Island, Florida 32034	
			Remov
			Remo
			
			Remov
			Add
			Remov
ANNULES ELYMPIANIES			Add
aforemention	nder the law of which this entity is o	by the official having custody of records	Remove TARY OF TARY OF

Filing Fee: \$25.00