FERNANDINA	BEACH, FL 32034			
Current Ma	iling Address:			
3105 B FIF				
FERNANDI	NA BEACH, FL 32034 US			
FEI Number: 81-2754514			Certificate of Status Desire	d: Yes
Name and A	Address of Current Registered Agent:			
LAWHORN, DA 3105 B FIRST FERNANDINA				
The above name	d entity submits this statement for the purpose of changing its regi	stered office or regis	stered agent, or both, in the State of Florida	
	d entity submits this statement for the purpose of changing its regi E: DANNY J LAWHORN	stered office or regis		4/10/2019
		stered office or regis		
SIGNATURI	E: DANNY J LAWHORN	stered office or regis		4/10/2019
SIGNATURI	E: DANNY J LAWHORN Electronic Signature of Registered Agent	stered office or regis		4/10/2019
SIGNATURI Authorized	E: DANNY J LAWHORN Electronic Signature of Registered Agent Person(s) Detail :		0	4/10/2019
SIGNATURI Authorized	E: DANNY J LAWHORN Electronic Signature of Registered Agent Person(s) Detail : MGR	Title	MGR	4/10/2019
SIGNATURI Authorized Title Name Address	E: DANNY J LAWHORN Electronic Signature of Registered Agent Person(s) Detail : MGR LAWHORN, DANNY	Title Name	MGR LAWHORN, BONNIE 3105 B FIRST AVE.	4/10/2019
SIGNATURI Authorized Title Name Address	E: DANNY J LAWHORN Electronic Signature of Registered Agent Person(s) Detail : MGR LAWHORN, DANNY 3105 B FIRST AVE.	Title Name Address	MGR LAWHORN, BONNIE 3105 B FIRST AVE.	4/10/2019
SIGNATURI Authorized Title Name Address City-State-Zip:	E: DANNY J LAWHORN Electronic Signature of Registered Agent Person(s) Detail : MGR LAWHORN, DANNY 3105 B FIRST AVE. FERNANDINA BEACH FL 32034	Title Name Address City-State-Zip:	0 MGR LAWHORN, BONNIE 3105 B FIRST AVE. FERNANDINA BEACH FL 32034	4/10/2019

DOCUMENT# L16000101034

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: AMELIA ISLAND ESCAPE RENTALS LLC

**Current Principal Place of Business:** 

3105 B FIRST AVE

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: DANNY LAWHORN

City-State-Zip: FERNANDINA BEACH FL 32034

MANGER

Date

Electronic Signature of Signing Authorized Person(s) Detail

City-State-Zip: YULEE FL 32097

04/10/2019

## FILED Apr 10, 2019 **Secretary of State** 7352722683CC