

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L16000101034

**Entity Name:** AMELIA ISLAND ESCAPE RENTALS LLC

**Current Principal Place of Business:**

3319 SEAMARSH RD  
AMELIA ISLAND, FL 32034

**Current Mailing Address:**

3319 SEAMARSH RD  
AMELIA ISLAND, FL 32034 US

**FEI Number: 81-2754514**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

LAWHORN, DANNY J  
3319 SEAMARSH RD  
AMELIA ISLAND, FL 32034 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE: DANNY J LAWHORN**

**04/13/2018**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name LAWHORN, DANNY  
Address 3105 FIRST AVE.  
City-State-Zip: FERNANDINA BEACH FL 32034

Title MGR  
Name LAWHORN, BONNIE  
Address 3105 FIRST AVE.  
City-State-Zip: FERNANDINA BEACH FL 32034

Title MGR  
Name FREDERICK, APRIL  
Address 3319 SEAMARSH RD  
City-State-Zip: AMELIA ISLAND FL 32034

Title AMBR  
Name WADE, ASHLEY  
Address 97179 EMERALD LANE  
City-State-Zip: YULEE FL 32097

*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**

**MGR**

**04/13/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date