

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000017528

**Entity Name:** LINDSTAM RENTALS, LLC

**Current Principal Place of Business:**

2758 PARRISH CEMETERY RD  
JACKSONVILLE, FL 32221

**Current Mailing Address:**

2758 PARRISH CEMETERY RD  
JACKSONVILLE, FL 32221 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

JONES, ROBERT LIII  
5150 BELFORT RD. BLDG 500  
JACKSONVILLE, FL 32256 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGR  
Name LINDSTAM, CLAYTON D  
Address 2758 PARRISH CEMETERY RD  
City-State-Zip: JACKSONVILLE FL 32221

Title MGR  
Name LINDSTAM, SANDRA J  
Address 2758 PARRISH CEMETERY RD  
City-State-Zip: JACKSONVILLE FL 32221

*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:** CLAYTON LINDSTAM

MR.

01/14/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date