that my name appears above, or on an attachment with all other like empowered.

MGR

SIGNATURE: JACQUELINE CAMPO

Electronic Signature of Signing Authorized Person(s) Detail

Current Principal Place of Business:

Entity Name: EAST COAST RENTALS, LLC

DOCUMENT# L18000200860

313 S. ATLANTIC AVE UNIT 331 DAYTONA BEACH, FL 32114

Current Mailing Address:

52 BYRON ELLINOR DR. ORMOND BEACH, FL 32176

FEI Number: 83-0995654

Name and Address of Current Registered Agent:

CAMPO, JACQUELINE 52 BYRON ELLINOR DR. ORMOND BEACH, FL 32176 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

Authorized Person(s) Detail :

MGR	Title	MGR
CAMPO, JACQUELINE	Name	CAMPO, DOMINIC
52 BYRON ELLINOR DR.	Address	52 BYRON ELLINOR DR.
ORMOND BEACH FL 32176	City-State-Zip:	ORMOND BEACH FL 32176
	MGR CAMPO, JACQUELINE 52 BYRON ELLINOR DR.	MGRTitleCAMPO, JACQUELINEName52 BYRON ELLINOR DR.Address

Certificate of Status Desired: Yes

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

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 11, 2019 Secretary of State 1203384369CC

> 04/11/2019 Date

Date