

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000187109

**Entity Name:** SHOE CREW RENTALS, LLC

**Current Principal Place of Business:**

62 WEST 9TH AVENUE  
HORSESHOE BEACH, FL 32648

**Current Mailing Address:**

P.O. BOX 385  
HORSESHOE, FL 32648

**FEI Number:** 85-1719403

**Certificate of Status Desired:** Yes

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

REINKE, HOPE A  
62 WEST 9TH AVENUE  
HORSESHOE BEACH, FL 32648 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:** HOPE A. REINKE

04/30/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                         |                 |                          |
|-----------------|-------------------------|-----------------|--------------------------|
| Title           | MGR                     | Title           | MGR                      |
| Name            | BOST, CLIFF             | Name            | REINKE, HOPE             |
| Address         | 309 TAMARAC TRI         | Address         | P.O. BOX 385             |
| City-State-Zip: | PEACHTREE CITY FL 32069 | City-State-Zip: | HORSESHOE BEACH FL 32648 |

*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:** HOPE A. REINKE

MGR

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date