

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2003 8:00 am
Secretary of State

04-17-2003 90033 008 ****50.00

DOCUMENT # L02000002680

1. Entity Name

THE RENT SHOP OF FLORIDA, LLC



Principal Place of Business

902 UPPER STUMP ROAD
CHALFONT PA 18914

Mailing Address

902 UPPER STUMP ROAD
CHALFONT PA 18914

44002088

2. Principal Place of Business

1300 S. FEDERAL Hwy

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DANIA FL

City & State

4. FEI Number

EIN-75-2985709

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name

PATRICK COYLE

Street Address (P.O. Box Number is Not Acceptable)

2135 NORTH LAKE SHORE DR.

City

ORANGE PARK

FL

Zip Code

32073

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

PATRICK COYLE

Patrick Coyle

5/14/03

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
OPERATING MEMBER
JERRILEY V. BAGLEY
P.O. Box 301
HILLTOWN, PA 18927

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

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STREET ADDRESS
CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:

SIGNATURE OF JERRILEY V. BAGLEY

4/13/03 215-906-7500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)