

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000027660

FILED
Oct 15, 2007
Secretary of State

Entity Name: INNOVATIVE LEASING & RENTAL, LLC

Current Principal Place of Business:

13060 SE COUNTY RD. 484
BELLEVIEW, FL 34420

New Principal Place of Business:

Current Mailing Address:

3308 MEADE AVE.
LAS VEGAS, NV 89102

New Mailing Address:

1012 SHARP CIRCLE
NORTH LAS VEGAS, NV 89030

FEI Number: 20-4506754 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BHAME, RONALD M
628 HAMPTON DOWNS COURT
JACKSONVILLE, FL 32259 US

Name and Address of New Registered Agent:

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: RONALD BHAME

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: HARRIS, CHRISTOPHER L
Address: 3324 HASTINGS AVE.
City-St-Zip: LAS VEGAS, NV 89107

Title: MGRM () Delete
Name: CONLEY, PETER L
Address: 38 OYSTER SHELL LANE
City-St-Zip: HILTON HEAD, SC 29926

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HARRIS, CHRISTOPHER L
Address: 1012 SHARP CIRCLE
City-St-Zip: NORTH LAS VEGAS, NV 89030

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: CHRIS HARRIS

MGRM

10/15/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date