2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000035419

Entity Name: NSB RENTALS, LLC

FILED Oct 27, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

715 N. HWY 17-92

LONGWOOD, FL 32750-320 US

Current Mailing Address: New Mailing Address:

715 N. HWY 17-92 715 N. HWY 17-92

LONGWOOD, FL 32750 US LONGWOOD, FL 32750-320 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

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

THOMPSON, JENNIFER C 715 N. HWY. 17-92 LONGWOOD, FL 32750 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: JENNIFER THOMPSON

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM () Delete Title: () Change () Addition

Name:THOMPSON, CARROLLName:Address:32 RICHMOND DR.Address:

City-St-Zip: NEW SMYRNA BEACH, FL 32169 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 THOMPSON, YOLANDA
 Name:

 Address:
 32 RICHMOND DR.
 Address:

 City-St-Zip:
 NEW SMYRNA BEACH, FL 32169
 City-St-Zip:

Title: MGRM () Delete Title: () Change () Addition

 Name:
 THOMPSON, JENNIFER C
 Name:

 Address:
 715 N. HWY 17-92
 Address:

 City-St-Zip:
 LONGWOOD, FL 32750
 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: JENNIFER THOMPSON MGRM 10/27/2008