

L09000039743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

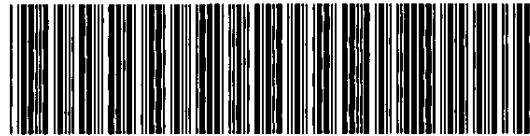
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900187142709

10/7/10
E. DENNARD
AC

Malave, Erin

From: Rob Shackleford [rob.mankus@yahoo.com]

Sent: Wednesday, October 06, 2010 2:02 PM

To: CorpAddressChange

Subject: RENTALS 4 JAX, LLC

DOCUMENT # L09000039743

PRINCIPAL ADDRESS

1606 REDSTONE CT

ST AUGUSTINE, FL 32092

MAILING ADDRESS

PO BOX 600335

JACKSONVILLE, FL 32260

MANAGER/MEMBER DETAIL

SHACKLEFORD, STEVE D MGR

PO BOX 600335

JACKSONVILLE, FL 32260