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(Requestor's Name)								
(Address)								
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PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 31, 2020

MARC BELL 6800 BROLEN SOUND PKWY NW STE 200 BOCA RATON, FL 33487

SUBJECT: INNOVATIVE RENTAL CONCEPTS LLC

Ref. Number: L12000033188

We have received your document for INNOVATIVE RENTAL CONCEPTS LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood Regulatory Specialist II

Letter Number: 120A00006971

COVER LETTER

TO: Registration Section Division of Corporations									
SUBJECT: <u>Innovative Rental Concepts iic</u> Name of Limited Liability Company									
Dear Sir or Madam:									
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.									
Please return all correspondence concerning this matter to the following:									
Mame of Person									
Innovative Rental Concepts LC Firm/Company									
6800 Broken Sound PKWY NW Swite 200 Address									
Buca Raton FL 33487 City/State and Zip Code									
E-mail address: (to be used for future annual report notification)									
For further information concerning this matter, please call:									
Mame of Person at (561) 988 1701 Name of Person Area Code & Daytime Telephone Number	 oer								
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303									
Enclosed is a check for the following amount:									
□ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy									

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: <u>Innovati</u>	ve l	Renta	i Concer	ita	LLC_
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		1 6800	•	f limited l	d PROGNICO iability company:
		Suite 200		Suit	e 200		
		Boca Raton FL 33487	-	<u>Boca</u>	Ration F	ر 3	3487
_		3/7/2012		L1.2	.000033 <u>1</u>		
3.		Date of filing/registration in Florida	4.		Document nur	mber	
5.	(a)	So Jean Figuera, Esq. Registered Agent and Registered Office shown on the records of the	: Florida	Dept. of Sta	_ te:		
		Registered Office Address (MUST BE FLORIDA STREET AL)		_		
		Suite 200			_		
		Buca Raton , FL	<i>3.348</i>	87	_		21/201
							- :
	(b)	Marc Bell Enter name of NEW Registered Agent and/or NEW Registered O	ffice ad	dress:			- :3
		6800 Broken Sound Pkwy					13.7:
		NEW Registered Office Address:			_		7: 15
		Suite 200			_		J1
			3341	87	_		
ch ag wa	ange ent v is/we	imited liability company is not organized under the laws or changes are made, the Florida street address of the re vill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the line	egistere ility co the lim	ed office an mpany, it i ited liabilit	id the business is hereby confir ty company or a	office of med tha	`the registered t the change(s)
	· · · · · · · · · · · · · · · · · · ·	ture of a member or authorized representative of a member	1776	uce Be	U- Autho	rine d	<u>Representa</u> ut
I i pro the to	herei ovisi e obl mere	by accept the appointment as registered agent and agree on a member on soft all statutes relative to the proper and complete point of my position as registered agent as provided play reflect a change in the registered office address, I held in writing of this change.					

Signature of Registered Agent