113000047371

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PICK-UP WAIT MAII	L
(Business Entity Name)	
(Document Number)	
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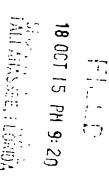
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K. SALY OCT 25 2018

COVER LETTER

TO: Registration Section Division of Corporations	,		
Churchill Rentals LLC SUBJECT:			
	Limited Liability Company		
Dear Sir or Madam:			
The enclosed Registered Agent/Registered Office Ch	hange and fee(s) are submitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
Sharlene Churchill			
Name of Person			
Churchill Rentals LLC			
Firm/Company			
58 Aster St			
Address			
Clearwater Florida 33767			
City/State and Zip Code			
sharlenecol@hotmail.com			
E-mail address: (to be used for future annual re	eport notification)		
For further information concerning this matter, pleas	se call:		
Sharlene Churchill	719 3259298		
Name of Person	Area Code & Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a check for the following amount	unt:		
☑ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy		
INHS18 (2/14)			

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. Name of the limited liability company	,: Churchill Ren	tals LLC			
2. (a) 58 Aster St		(b)			
Principal office address of limited	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
Clearwater Florida 33767					
03/29/2013		 L130	000047371		
Date of filing/registration	in Florida	4.	Document number		
i. (a) David Churchill					
Registered Agent and Registered Office sh	nown on the records of	the Florida Dept.	of State:		
58 Aster St					
Registered Office Address (MUST BE	FLORIDA STREET	(DDRESS)			
				-i-c - #	
Clearwater	FI	33767		8 00	
(b) Sharlene Churchill	H. MSW/ D. S.	0.000		18 OCT 15 PH 9: 20	
Enter name of NEW Registered Agent ar	id/or <u>NEW Registered</u>	Office address:		PH 9: 21	
NEW Registered Office Address:			 	D _A	
58 Aster St					
Clearwater	, FL	33767			
f the limited liability company is not organe the change or changes are made, the Floridagent will be identical. Or, in the case of was/were authorized by an affirmative vot the articles of organization of the operation. Signature of a member or authorized representation of the case of the companies of the companies of the companies of the case of the	da street address of a Florida limited li- te of the members of g agreement of the	the registered ability compared of the limited l limited liabili David C	l office and the business on y, it is hereby confirmed iability company or as othety company. Churchill Printed or typed name	ffice of the registered that the change(s) nerwise provided in of signee	
I hereby accept the appointment as regist provisions of all statutes relative to the pr the obligations of my position as registere to merely reflect a change in the registere notified in writing of this change.	erea agent and agroper and complete ad agent as provided office address, I	ee to act in the performance of for in Chapt hereby confirm	is capacity. I jurther agri of my duties, and I am fan er 605, F.S. Or, if this do n that the limited liability	ee to comply with the niliar with and accept cument is being filed company has been	