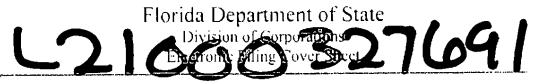
6/21/22, 9:50 AM

Division of Corporations



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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

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## LLC REGISTERED AGENT CHANGE FLORIDA I RENTALS, LLC

Certificate of Status	0
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Page Count	02
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Help

From: Kaity Toon

## 

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. N	Same of the limited liability company:FLORIDATREN	TALS, LI	.U			
2. (a)	15 redwood drive	(b	(b) 15 redwood drive			
<b>-</b> . (-,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limite (Note: MAY BE POS	ed liability comp	any:
	Dix Hills NY 11746		Dix Hills 1	1746		
	,	_			· · · · · · · · · · · · · · · · · · ·	
	07/16/2021		1.210003276	591		
3.	Date of filing/registration in Florida	4,		Document number	<del></del>	
5. (a	)					
<i>3.</i> ( <i>i</i>	Registered Agent and Registered Office shown on the records of	d Agent and Registered Office shown on the records of the Florida Dept. of State:				
	CT CORPORATION SYSTEM			_		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS	2			
	1200 S PINE ISLAND RD	****		-	~	,
	PLANTATION , FL	33324			2022 JUN 2	
	,	<u> </u>	•	-	· =	二
(b	Enter name of NEW Registered Agent and/or NEW Registered				~\frac{1}{2}	四点式
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:			
	James S. Fenimore Sr.			_	PH 2:	, VIII
	NEW Registered Office Address:			-	~	
	65 Flatwoods Forest Loop			<del>.</del>	co	
		22450				
	Santa Rosa Beach , FI.			_		
the c	limited liability company is not organized under the lay mange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liewere authorized by an affin lative vote of the members of ticles of organization or the operating agreement of the	the regiability co	stered offici impany, it i	e and the business of s hereby confirmed y company or as of	office of the re that the chan	egistered gc(s)
		Jam	es S Fenimo	re Sr	·	
	nature of a member or authorized representative of a member			Printed or typed name	•	
	reby accept the appointment as registered agent and agi sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide trely reflect a change in the registered office address, I ded in writing of this change.					
By: Signa	iture of Registered Agen:					