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### COVER LETTER

	Registration Section Division of Corporation	s					
SUBJEC	T: LRZ Rentals LLC						_
	<del></del>	Name of I	Limited Liability C	Company		·	- <del></del>
		eign Limited Liability Comp I to register the above refere					
Please ret	urn all correspondence c	oncerning this matter to the	following:				
	Leon Zook						_
		N:	ame of Person				_
	LRZ Rentals L	LC					
		Fi	rm/Company	· · ·			_
	721 Semmie	Drive					
			Address			_	<del></del>
	Virginia Beach					SECTION OF	_ 71 .
	leonzook@cox.n		tate and Zip Code			JAN -5	
		E-mail address: (to be used	d for future annual	report noti	fication)		- 111
For furthe	er information concerning	g this matter, please call:				FLORIDA	•
_	Nevin Beiler, Esq.		_ at (_717	) _287-16	88		_
	Name o	f Contact Person	Area Code	Dayı	time Teleph	one Number	
 	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division of Registrati Clifton Bi 2661 Exe	ADDRESS of Corporat on Section ailding cutive Cent ee, FL 3230	ions er Circle	
	is a check for the follow \$125.00 Filing Fee	ing amount:  ☐ \$130.00 Filing Fee &  Certificate of Status	S155.00 Filin Certified Copy	ng Fee &		0 Filing Fee, & Certified C	

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPILANCE WITH SECTION 605.0902, FEORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF FLORIDA:

Liability Company," "L.L.C."	ernate name adopted for the purpos	se of transacting busine	ss in Florida. The alternate	name must include	"Limited
Pennsylvania	or race.	3. 82-1852194			
	of which foreign limited liability	3. 02 7002107	(FEI number, if applies	able)	
4. N/A					
··	(Date first transacted busine (See sections 605.0904 & 605	ess in Florida, if prior to ,0905, F.S. to determin	o registration.) le penalty liability)		
5. 721 Semmie Drive				_ <del></del>	
Virginia Beach, VA 23					
704.0	(Street Address of	Principal Office)			
6. 721 Semmie Drive					
Virginia Beach, VA 234					
	(Mailing	Address)		2018 ***C	
7. Name and street addres	s of Florida registered agent: (P	O. Box NOT accep	table)	B JAN GREE LAHA	<del>'11</del>
Name:	Registered Agents Inc.		<del></del>	SS	
Office Address:	3030 N. Rocky Point Dr. ST	E 150A	_	S U	m
	Tampa (City)		. Florida 33607 (Zin code	<del>_</del>	D
Registered agent's accep	tance:				
registered agent a accep	nictanal arout and to account car	vice of process for the	he above stated limited l	liability company	
Having been named as re				n this connains. I	
Having been named as re designated in this applica	tion, I hereby accept the appoin ons of all statutes relative to the	itment as registered o	agent and agree to act it		
Having been named as re designated in this applica- to complywith the provision	tion, I hereby accept the appoin	itment as registered o	agent and agree to act it		
Having been named as re designated in this applica- to complywith the provision	tion, I hereby accept the appoin ons of all statutes relative to the ny position as registered agent.	ntment as registered of proper and complet	agent and agree to act in e performance of my di		
Having been named as re designated in this applica- to complywith the provision	tion, I hereby accept the appoin ons of all statutes relative to the ny position as registered agent.	itment as registered o	agent and agree to act in e performance of my di		
Having been named as red designated in this applicate to complywith the provision accept the obligations of r	tion, I hereby accept the appoin ons of all statutes relative to the ny position as registered agent.	trent as registered of proper and completed agent's signature	agent and agree to act in e performance of my di		
Having been named as red designated in this applicate to comply with the provision accept the obligations of research.  8. The name, title or capa	tion, I hereby accept the appoin ons of all statutes relative to the ny position as registered agent. (Regis	reproper and completed agent's signature  ) who has/have autho	agent and agree to act in e performance of my du		
Having been named as redesignated in this application complywith the provision accept the obligations of research.  8. The name, title or capalleon Zook, Member	tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.  (Regist city and address of the person(s)	proper and completed agent's signature ) who has/have author Beach, VA 23457	agent and agree to act in e performance of my du		
Having been named as redesignated in this application complywith the provision accept the obligations of research the name, title or capa Leon Zook, Member	tion, I hereby accept the appoint ons of all statutes relative to the my position as registered agent.  (Registery and address of the person(s) 721 Semmie Drive, Virginia	proper and completed agent's signature ) who has/have author Beach, VA 23457	agent and agree to act in e performance of my du		

Typed or printed name of signee

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes, I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Leon Zook

## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE

11/09/2017

### TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

#### LRZ Rentals LLC

is duly registered as a Pennsylvania Limited Liability Company under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT this Subsistence Certificate shall not imply that all fees, taxes and penalties owed to the Commonwealth of Pennsylvania are paid.

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IN TESTIMONY WHEREOF, I have here to see my hand and caused the Seal of the Secretary's

Office to be affixed, the day and year above written

Acting Secretary of the Commonwealth

AMAST VANIT

Certification Number: TSC171109131026-1

Verify this certificate online at http://www.corporations.pa.gov/orders/verify