

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000120126

**Entity Name:** IMPACT RENTALS, LLC

**Current Principal Place of Business:**

11653 CENTRAL PARKWAY  
SUITE 219  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

11653 CENTRAL PARKWAY  
SUITE 219  
JACKSONVILLE, FL 32224 US

**FEI Number:** 82-1957853

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

HAMMERS, RYAN  
11653 CENTRAL PARKWAY  
SUITE 219  
JACKSONVILLE, FL 32224 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title VP  
Name HAMMERS, RYAN  
Address 2057 SPOONBILL ST  
City-State-Zip: JACKSONVILLE FL 32224

Title VP  
Name MCCULLER, JUSTIN  
Address 1856 BUCCANEER DR  
City-State-Zip: JACKSONVILLE FL 32225

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RYAN HAMMERS

**OWNER**

**02/04/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date