

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000259980

**Entity Name:** G4H RENTAL & SALES LLC**Current Principal Place of Business:**1329 LAKE DRIVE  
CASSELBERRY, FL 32707**Current Mailing Address:**4314 WYNDCLIFF CIR  
ORLANDO, FL 32817 US**FEI Number:** 46-1272835**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHARLESTON, JAMES R  
4314 WYNDCLIFF CIR  
ORLANDO, FL 32817 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            | CHARLESTON, JAMES  |
| Address         | 4314 WYNDCLIFF CIR |
| City-State-Zip: | ORLANDO FL 32817   |

|                 |                         |
|-----------------|-------------------------|
| Title           | MGR                     |
| Name            | CHARLESTON, NICOLETTE S |
| Address         | 4314 WYNDCLIFF CIR      |
| City-State-Zip: | ORLANDO FL 32817        |

|                 |                      |
|-----------------|----------------------|
| Title           | MGR                  |
| Name            | CHARLESTON, MILA A   |
| Address         | 1121 STEARNS DR      |
| City-State-Zip: | LOS ANGELES CA 90035 |

|                 |                        |
|-----------------|------------------------|
| Title           | PRES                   |
| Name            | CHARLESTON, JAMES RYAN |
| Address         | 4314 WYNDCLIFF CIR     |
| City-State-Zip: | ORLANDO FL 32817       |

|                 |                      |
|-----------------|----------------------|
| Title           | VP                   |
| Name            | CHARLESTON, JAMIEE N |
| Address         | 4314 WYNDCLIFF CIR   |
| City-State-Zip: | ORLANDO FL 32817     |

*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:** JAMES R CHARLESTON

VP

03/25/2020

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date