		3134050225CC		
	ncipal Place of Business:			
126 MONTURA				
PONTE VEDRA	ABEACH, FL 32082			
Current Mai	ling Address:			
126 MONTU	RADRIVE			
PONTE VED	DRA BEACH, FL 32082 US			
FEI Number: 87-1607060			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
ZENBUSINESS 336 E. COLLEG	-			
	DE AVE.			
SUITE 301				
SUITE 301	, FL 32301 US			
SUITE 301 TALLAHASSEE		s registered office or regis	tered event or both in the State of Florida	
SUITE 301 TALLAHASSEE The above named	d entity submits this statement for the purpose of changing its	s registered office or regis		
SUITE 301 TALLAHASSEE The above named	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI	s registered office or regis		3/09/2022
SUITE 301 TALLAHASSEE The above named	d entity submits this statement for the purpose of changing its	s registered office or regis		
SUITE 301 TALLAHASSEE The above named SIGNATURE	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI	s registered office or regis		3/09/2022
SUITE 301 TALLAHASSEE The above named SIGNATURE	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI Electronic Signature of Registered Agent	s registered office or regis		3/09/2022
SUITE 301 TALLAHASSEE The above named SIGNATURE Authorized	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI Electronic Signature of Registered Agent Person(s) Detail :		0	3/09/2022
SUITE 301 TALLAHASSEE The above named SIGNATURE Authorized Title	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI Electronic Signature of Registered Agent Person(s) Detail : AMBR	Title	AMBR	3/09/2022
SUITE 301 TALLAHASSEE The above named SIGNATURE Authorized Title Name Address	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI Electronic Signature of Registered Agent Person(s) Detail : AMBR PERUSSAULT, TAMI S	Title Name Address	AMBR PERUSSAULT, MICHAEL S	3/09/2022 Date
SUITE 301 TALLAHASSEE The above named SIGNATURE Authorized Title Name Address	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI Electronic Signature of Registered Agent <b>Person(s) Detail :</b> AMBR PERUSSAULT, TAMI S 126 MONTURA DRIVE	Title Name Address	AMBR PERUSSAULT, MICHAEL S 126 MONTURA DRIVE	3/09/2022 Date
SUITE 301 TALLAHASSEE The above named SIGNATURE Authorized Title Name Address	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI Electronic Signature of Registered Agent <b>Person(s) Detail :</b> AMBR PERUSSAULT, TAMI S 126 MONTURA DRIVE	Title Name Address	AMBR PERUSSAULT, MICHAEL S 126 MONTURA DRIVE	3/09/2022 Date
SUITE 301 TALLAHASSEE The above named SIGNATURE Authorized Title Name Address	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI Electronic Signature of Registered Agent <b>Person(s) Detail :</b> AMBR PERUSSAULT, TAMI S 126 MONTURA DRIVE	Title Name Address	AMBR PERUSSAULT, MICHAEL S 126 MONTURA DRIVE	3/09/2022 Date
SUITE 301 TALLAHASSEE The above named SIGNATURE Authorized Title Name Address	d entity submits this statement for the purpose of changing its E: KHADIJEH HEMMATI Electronic Signature of Registered Agent <b>Person(s) Detail :</b> AMBR PERUSSAULT, TAMI S 126 MONTURA DRIVE	Title Name Address	AMBR PERUSSAULT, MICHAEL S 126 MONTURA DRIVE	3/09/2022 Date

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000310591

Entity Name: LONG POND RENTAL LLC

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: TAMI S. PERUSSAULT

MEMBER

03/09/2022

FILED Mar 09, 2022

**Secretary of State** 

Electronic Signature of Signing Authorized Person(s) Detail

Date