that my name appears above, or on an attachment with all other like empowered. 04/30/2021 MANAGING PARTNER

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: SHORT'S RESORT RENTALS, LLC **Current Principal Place of Business:**

7234 MORRAL KIRKPATRICK RD

DOCUMENT# M12000004224

CALEDONIA, OH 43314

Current Mailing Address:

7234 MORRAL KIRKPATRICK RD CALEDONIA. OH 43314

FEI Number: 45-4982015

Name and Address of Current Registered Agent:

GEORGE, DAWN 6771 13TH AVE N ST. PETERSBURG, FL 33710 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

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	SHORT, WESLEY J	Name	GLENN-SHORT, STACI D
Address	7234 MORRAL KIRKPATRICK RD	Address	7234 MORRAL KIRKPATRICK RD
City-State-Zip:	CALEDONIA OH 43314	City-State-Zip:	CALEDONIA OH 43314

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

SIGNATURE: STACI D. GLENN-SHORT

Date

FILED Apr 30, 2021 Secretary of State 2212130439CC

Certificate of Status Desired: Yes

Date