

Florida Department of State

A22 00000124

Note: Please print this page and use it as a cover sheet. Type the fax/audit number (shown below) on the top and bottom of all pages of the document.

(((H22000076479 3)))



H220000764793ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.
Account Number : I19990000006
Phone : (407)425-7010
Fax Number : (407)425-2747

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Corporate@zkslawfirm.com

FLORIDA/FOREIGN LP/LLLP
Liberty Storage Fund II, LLLP

Table with 2 columns: Description and Value. Rows include Certificate of Status (0), Certified Copy (0), Page Count (03), and Estimated Charge (\$1,000.00).

2022 MAR -7 PM 2:25
APPROVED AND FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Liberty Storage Fund II, LLLP
Name of Florida Limited Partnership or Limited Liability Limited Partnership

The enclosed Certificate of Limited Partnership and fees are submitted for filing.

Please return all correspondence concerning this matter to:

N. Dwayne Gray, Jr. .

Contact Person
Zimmerman, Kiser & Sutcliffe, P.A.

Firm/Company
315 E. Robinson Street, Suite 600

Address
Orlando, FL 32801

City, State and Zip Code
corporate@zkslawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jamie Brown, Corporate Paralegal at (407) 425-7010

Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

- \$1,000.00 Filing Fees (\$965 Filing Fee and \$35 Registered Agent Fee)
- \$1,008.75 Filing Fees and Certificate of Status
- \$1,052.50 Filing Fees and Certified Copy
- \$1,061.25 Filing Fees. Certified Copy, and Certificate of Status

STREET ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

CR2E030 (6/17)

**CERTIFICATE OF LIMITED PARTNERSHIP
FOR
FLORIDA LIMITED PARTNERSHIP
OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. Liberty Storage Fund II, LLLP
(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) *Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.*

2. 824 Highland Avenue
(Street address of initial designated office)
Orlando, FL 32803

3. ZKS Registered Agent Services, LLC
(Name of Registered Agent for Service of Process)

4. 315 E. Robinson St., Suite 600
(Florida street address for Registered Agent)
Orlando, FL 32801

5. *I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

CM [Signature]

Signature of Registered Agent

6. 824 Highland Avenue
(Mailing address of initial designated office)
Orlando, FL 32803

7. If limited partnership elects to be a limited liability limited partnership, check box

2022 MAR - 7 PM 2: 25
APPROVED
AND
FILED
STATE OF FLORIDA

