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2006 DEC 29 A 8:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT # B00000000323

1. Entity Name
STORAGE SPOT PROPERTIES NO. 4, L.P.



Principal Place of Business
**WORLD TRADE CENTER EAST, TWO SEAPORT LANE
C/O AEW CAPITAL MGT., ATTN: RON MOSS
BOSTON, MA 02210-2021**

Mailing Address
**WORLD TRADE CENTER EAST, TWO SEAPORT LANE
C/O AEW CAPITAL MGT., ATTN: RON MOSS
BOSTON, MA 02210-2021**

2. Principal Place of Business
3. Mailing Address

Build, Apt. #, etc.
Suite, Apt. #, etc.

City & State
City & State

Zip
Country
Zip
Country



12142006 REIN-LP CR2E100 (1/1/06)

6. FEI Number
95-4826800

Applied For
Not Applicable

8. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

8. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

9. Pursuant to the provisions of section 620.1610 or 620.1605, Florida Statutes, I hereby approve the appointment of registered agent. I am familiar with, and accept the obligation of Chapter 620, Florida Statutes.

SIGNATURE Connie Bryan **CONNIE BRYAN**
SPECIAL ASSISTANT SECRETARY
DATE **12/29/2006**

FILE MONTHLY FEE IS \$1800.00
After January 1, 2007, Fee will be \$2000.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION		13. ADDRESS CHANGES ONLY	
DOCUMENT #	M03000001126	STREET ADDRESS	
NAME	STORAGEWORLD PROPERTIES GP NO. 4, LLC	CITY-ST-ZIP	
STREET ADDRESS	WORLD TRADE CENTER EAST, TWO SEAPORT LANE		
CITY-ST-ZIP	BOSTON, MA 022102021		
DOCUMENT #		STREET ADDRESS	
NAME		CITY-ST-ZIP	
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NAME		CITY-ST-ZIP	
STREET ADDRESS			
CITY-ST-ZIP			

REINSTATEMENT 06

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14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature and name have the same legal effect as if made under oath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: [Signature] **12-29-06** **617-261-9000**

STAPLE CHECK HERE

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Division of Corporations

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Florida Department of State
Division of Corporations
Public Access System

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

LP/LLLP REINSTATEMENT
STORAGE SPOT PROPERTIES NO. 4, L.P.

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