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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA00000023

: (850)205-8842

Fax Number

: (850)878-5368

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

Email Address:

## FOREIGN PROFIT/NONPROFIT CORPORATION

PS Florida One Lake Mary, Inc.

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12/29/2015	1:05:36	PM	From:	To:	8506176383 (	2/5

## **COVER LETTER**

	istration Sec ision of Cor				
SUBJECT	PS Florida	i One Lake Mary, Ii	ne.		
		Name o	of corporation	- must include suffix	<del></del>
Dear Sir or	Madam:				
"Certificate	of Existence		of Good Star	ding" and check are si	sact Business in Florida," abmitted to register the
Please retur	n all corresp	ondence concerni	ng this matter	to the following:	
Dawn Oschr	ามทา				
	<del></del> -		Name of	Person	
Public Stora	ge .				
			Firm/Com	pany	
701 Western	Avenue				
			Addre	ess ·	
Glendale, Ca	difornia 9120	1-2349			
			City/State as	nd Zip code	
doschmann@	βρubliestorag	e.com			
		E-mail address	(to be used i	or future annual repor	t notification)
For further	nformation (	concerning this m	atter, please o	all:	
			at (	)	
Na	ne of Persor	1	Area Cod	Daytime Tele	phone Number
Reg Div Clif 266	istration Sec ision of Corp ton Building	oorations Center Circle	S:	MAILING Registration Division of O P.O. Box 63 Tallahassee,	Section Corporations 27
Enclosed is	a check for t	he following amo	unt:		
□ \$70.00 F	iling Fee	\$78.75 Filing Certificate of		\$78.75 Filing Fee & Certified Copy	□ \$87.50 Filing Fee, Certificate of Status & Certified Copy

PS Florida One Lake Mary, Inc.

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

December 28, 2015  (Date of incorpor	55.	(FEI number, if app (Date of duration, if other t	•
(State or country under the December 28, 2015  (Date of incorpor	55.		•
(SI		(Date of duration, if other	than perpetual)
(SI		(Date of duration, if other	than perpetual)
(SI	(Date first transacted hijeiness in		
•	(Date first transacted business in		
	EE SECTIONS 607.1501 & 607.150	Florida, if prior to registration) 02, F.S., to determine penalty liabilit	.ty)
701 Western Avenue, Glenda	le, Catifornia 91201-2349	. ,	
		al office address)	
	(0)	11 (6.1)(6.1)	= =
	(Current mailing	g address, if different)	<b>5</b>
Name and street address o	f Florida registered agent: (P.O	. Box NOT acceptable)	- 新聞 <b>局</b>
	oration System		29 SSEE
1200 Sou	th Pine Island Road	<del>_</del> -	
ilice Address:		<del>_</del>	23 9
Plantation	1	, Florida	票司 品
	(City)	(Zip code)	

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12/29/2015 1:05:36 PM From: To: 8506176383( 4/5 ) 11. Names and business addresses of officers and/or directors: A. DIRECTORS Chairman: Lily Y. Hughes 701 Western Avenue, Glendale, California 91201-2349 Address: \_\_ Todd Andrews Director: 701 Western Avenue, Glendale, California 91201-2349 Address: Director: Address: B. OFFICERS David F. Doll President: 701 Western Avenue, Glendale, California 91201-2349 Vice President: \_\_\_Sharon Linder 701 Western Avenue, Glendale, California 91201-2349 Lily Y. Hughes 701 Western Avenue, Glendale, California 91201-2349 Address: Todd Andrews Treasurer: 701 Western Avenue, Glendale, California 91201-2349 Address: NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors. Signature of Director or Officer The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. 13. Sharon Linder, Vice President

(Typed or printed name and capacity of person signing application)

## Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PS FLORIDA ONE LAKE MARY, INC." IS

DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN

GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-EIGHTH DAY OF

DECEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

TO DEC 29 M 9-18
SECRETARY OF STATE
AND A SKEET FLOWDA

5784840 8300 SR# 20151543778

Authentication: 10689471

Date: 12-28-15