## W1000020781

Suite 1030 Irvine, CA 92614  (Address)  (City/State/Zip/Phone #)    PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies   Certificates of Status    Special Instructions to Filing Officer:  Y / 2	-	<ul> <li>Charles Baclet and Associates, Inc. —</li> <li>2030 Main St.</li> </ul>							
(Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		Suite 1030							
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	_	- Irvine, CA 92614							
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:									
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:	(Address)								
PICK-UP   WAIT   MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:									
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		(City/State/Zip/Phone #)							
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:									
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:		PICK-UP WAIT MAIL							
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:									
(Document Number)  Certified Copies Certificates of Status  Special Instructions to Filing Officer:									
Certified Copies Certificates of Status  Special Instructions to Filing Officer:		(Business Entity Name)							
Certified Copies Certificates of Status  Special Instructions to Filing Officer:									
Special Instructions to Filing Officer:  Y//  F/F  CM	_	(Document Number)							
Special Instructions to Filing Officer:  Y//  F/F  CM									
4/12 F/A Ch	Cert	fied Copies Certificates of Status							
4/12 F/A Ch									
4/12 F/A Ch	_								
, ,	Special Instructions to Filing Officer:								
, ,	IV	In Kin Oh 2							
, ,	'	117 117 W							
, ,	'   '								
W1-20781									
W1-20781									
$W^{-0}$	1 121-2078								
		WITOUISI							

Office Use Only



900049797219

04/12/05--01022--006 \*\*25.00

MAH ;

15 to 15 to 3:51

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limi	ted liability company	is: PUBLIC STORA	AGE KENDALE LA	KES, LLC	
2. The mailing address					
701 Western Avenue, Gle	ndale, CA 91201				
0.0004		1.0	1000020781		
December 3, 2001					
<ol><li>Date of filing/registra</li></ol>	ation in Florida	4.	Document numb	er	
5. The name of the regis Florida Department of	tered agent and the re	egistered office add	ress as shown on	the records of t	ihe
•	Miami Center Regis	tered Agents, LLC			
	<u></u>	Name			
	201 S. Biscayne Blv	d., Suite 1700		1	~
		Address		•	05 !
	Miami, FL 33131			•	MP: 12
	Ci	ity, State and Zip		•	<del>-</del> ,,
6. The name and address	s of the new registered	d agent and/or offic	e:	,	
	NDAL Comicae Inc				10 M
	NRAI Services, Inc.	N		,-	ယ္
	2731 Executive Park	Name Drive, Suite 4			<u>্</u> র
		ress (P.O. Box NO	T acceptable)	<b>→</b>	
	Weston	FL 33331			
	_ <del></del>	y, State and Zip			
If the limited liability conconfirmed that after the cand the business office of liability company, it is he the members of the limit the operating agreement SEE ATTACHED	change or changes are  f the registered agent ereby confirmed that ed liability company of the limited liability	e made, the Florida will be identical. the change(s) was/ or as otherwise pro y company.	street address of Or, in the case of	the registered of a Florida limit	office ed
Signature of a member or autho	rized representative of a me	ember)			
SEE ATTACHED					
(Printed or typed name of signee	<del>;</del> )				
	pintment as registered ns of all statutes reland accept the obligate this document is being that the limited liab	d agent and agree to tive to the proper of the position of my position of filed to merely has allity company has	o act in this cape ind complete per as registered ag eflect a change in been notified in v	acity. I further of formance of my ent as provided in the registered writing of this co	agree to duties, for in office hange.
(Signature of Registered Agent) Paul J. Hagan, Assistant S <b>Divisi</b>	ecretary on of Corporations,	P.O. Box 6327, T	allahassee, FL	32314	
NHS18(10/99)	FIL	ING FEE: \$25.00	J		

INHS18(10/99)

## **ATTACHMENT**

## PUBLIC STORAGE KENDALE LAKES, LLC

PS HKBF, LLC, BY:

a Florida domestic limited liability company,

its managing member

BY:

Public Storage, Inc., a California domestic corporation,

its managing member

John W Baumann, Senior Vice President Ву: