

M0100000/457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

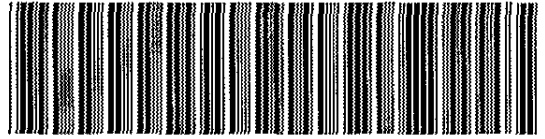
(Business Entity Name)

(Document Number)

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2002 OCT 23 PM 2:04  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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02 OCT 23 PM 12:08  
DIVISION OF CORPORATION

J. BRYAN OCT 23 2002

ACCOUNT FILING COVER SHEET

ACCOUNT NUMBER: FCA000000005  
REFERENCE: 3109764-4  
(Sub Account)  
DATE: 10/23  
REQUESTOR NAME: Lexis Document Services

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TALLAHASSEE, FLORIDA

ADDRESS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE: (\_\_\_\_) (\_\_\_\_ - \_\_\_\_\_) ext (\_\_\_\_)  
CONTACT NAME: \_\_\_\_\_

CORPORATION NAME: Everest Storage Manager II, LLC

DOCUMENT NUMBER: \_\_\_\_\_  
(if applicable)

AUTHORIZATION: Cynthia J. Woodyard

*Change RA  
25.00*

- CERTIFIED COPY (1-9)
- CERTIFICATE OF STATUS (1-9)
- PLAIN STAMPED COPY

- |  |  |                                     |
|--|--|-------------------------------------|
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input type="checkbox"/> Walk In         | <input type="checkbox"/> Will Wait       | <input type="checkbox"/> Pick Up    |
| <input type="checkbox"/> Mail Out        |  |                                     |

**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.*

EVEREST STORAGE MANAGER II, LLC

1. The name of the limited liability company is: \_\_\_\_\_
2. The mailing address of the limited liability company is :  
155 N. LAKE AVENUE, SUITE 1000, PASADENA, CA 91101

- 6/27/01 \_\_\_\_\_ M01000001457 \_\_\_\_\_
3. Date of filing/registration in Florida 4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

UCC FILING & SEARCH SERVICES, INC.  
\_\_\_\_\_  
Name  
526 EAST PARK AVENUE  
\_\_\_\_\_  
Address  
TALLAHASSEE, FL 32301  
\_\_\_\_\_  
City, State and Zip

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TALLAHASSEE, FLORIDA

6. The name and address of the new registered agent and/or office:  
LEXISNEXIS DOCUMENT SOLUTIONS INC.  
\_\_\_\_\_  
Name  
3953 W.W. KELLEY ROAD  
\_\_\_\_\_  
Florida street address (P.O. Box NOT acceptable)  
TALLAHASSEE 32311  
\_\_\_\_\_  
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

EVEREST STORAGE HOLDINGS, LLC, Manager  
  
\_\_\_\_\_  
(Signature of a member or authorized representative of a member)

David I. Lesser, Vice President of Manager  
\_\_\_\_\_  
(Printed or typed name of signee)

*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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

By: M. Galstian, Asst. Sec.  
(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314