| (Req | uestor's Name) | | | |
|---|------------------|-----------------|--|--|
| (Add | lress) | | | |
| (Add | ress) | | | |
| (City | /State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bus | iness Entity Nan | ne) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | of Status | | |
| Special Instructions to Filing Officer: | | | | |
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Office Use Only



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COVER LETTER

| Division of Corporations | | |
|---|--|------------------|
| SUBJECT: U-Haul Co. of Flo | | |
| Nam | e of Limited Liability Company | |
| | sility Company for Authorization to Transact Business in Floove referenced foreign limited liability company to transact | |
| Please return all correspondence concerning this ma | atter to the following: | |
| Kimberly Wolf - | Legal Department | |
| | Name of Person | |
| U-Haul | | |
| and the second second | Firm/Company | |
| 2721 N. Central | l Avenue | |
| | Address | |
| Phoenix, AZ 85 | 004 | |
| T HOEHIX, AZ 09 | City/State and Zip Code | |
| kimberly wolf@ | | DO 20 |
| | (to be used for future annual report notification) | |
| For further information concerning this matter, pleas | se call: | JUN 25 |
| Kimberly Wolf | _{at (} 602) 760-4972 | |
| Name of Contact Person | Area Code Daytime Telephone Numl | Sept of the |
| MAILING ADDRESS: | STREET ADDRESS: | 3 t |
| Division of Corporations | Division of Corporations | 6. |
| Registration Section P.O. Box 6327 | Registration Section Clifton Building | |
| Tallahassee, FL 32314 | 2661 Executive Center Circle Tallahassee, FL 32301 | |
| England is a shock for the following array | | |
| Enclosed is a check for the following amou ☐ \$125.00 Filing Fee ☐ \$130.00 Filing | | Fee, Certificate |
| Certificate of | | |

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| U-Haul Co. of Florida 2, LLC |
|---|
| (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C," or "LLC.") |
| _{2.} Delaware _{3.} 47-1133749 |
| (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) |
| 4(Date first transacted business in Florida, if prior to registration.) |
| (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5. 2727 N. Central Avenue |
| Phoenix, AZ 85004 |
| (Street Address of Principal Office) |
| _{6.} 2721 N. Central Avenue |
| Phoenix, AZ 85004 |
| (Mailing Address) |
| 7. The name, title or capacity and address of the person(s) who has/have authority to manage 1/3/are: |
| John C. Taylor, Manager 2727 N. Central Ave. Phoenix, AZ 85004 |
| Edward J. Shoen, Manager 2727 N. Central Ave. Phoenix, AZ 85004 |
| Gary B. Horton, Manager 1325 Airmotive Way, Ste. 100, Reno, NV 89562 |
| 8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official |
| having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not |
| acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted) |
| Alm C Taylor |
| Ignature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes are affirmation under the penalties of perjury that the facts stated herein are true, am aware that any 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.) |
| John C. Taylor |

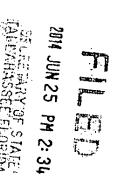
Typed or printed name of signee

MANAGEMENT STRUCTURE ATTACHMENT TO APPLICATION FOR REGISTRATION (SECTION 7)

U-HAUL CO. OF FLORIDA 2, LLC

Korri A. Behler, Manager 1209 Orange Street, Wilmington DE 19801

Tamara Kling, Manager 1209 Orange Street, Wilmington DE 19801



Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "U-HAUL CO. OF FLORIDA 2, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF JUNE, A.D. 2014.

5550604 8300

140831992

AUTHENTY CATION: 1450207

Jeffrey W. Bullock, Secretary of State

DATE: 06-13-14

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. | The name | of the | Limited | Liability | Company | / is: |
|----|----------|--------|---------|-----------|---------|-------|

U-Haul Co. of Florida 2, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

CT Corporation System

(Name)

1200 S. Pine Island Road

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation

__ 33324

City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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 605, Florida Statutes.

Lisa DuBois Asst. Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)