

M16000001328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

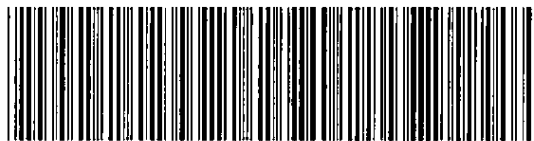
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



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10/17/23--01016--001 **\$620.00

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SIMPLY STORAGE NAPLES AIRPORT ROAD, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steve Babinski

Name of Person

Public Storage

Firm/Company

701 Western Avenue

Address

Glendale, CA 91201

City/State and Zip Code

sbabinski@publicstorage.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steve Babinski at (818) 649 - 3358

Name of Person Area Code & Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: SIMPLY STORAGE NAPLES AIRPORT ROAD, LLC

Enter new principal office address, if applicable: 701 Western Avenue
Glendale, CA 91201
***(Principal office address
MUST BE A STREET ADDRESS)***

Enter new mailing address, if applicable: 701 Western Avenue
Glendale, CA 91201
***(Mailing address
MAY BE A POST OFFICE BOX)***

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2. The Florida document number of this limited liability company is: M16000001328

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: 02/16/2016

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____
Enter Florida Street Address
_____, **Florida**
City Zip Code

New Registered Agent's Signature, if changing Registered Agent:
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 605, 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.

If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

See attached.

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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_____	_____	_____	<input type="checkbox"/> Add
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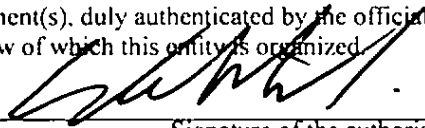
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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



 Signature of the authorized representative

Steve Babinski

Typed or printed name of signee

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 TALLAHASSEE, FLORIDA
 STATE DEPT OF STATE

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Filing Fee: \$25.00

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Title/Capacity	Name	Address	Type of Action
Manager	BSREP II Simply Storage JV LLC	4901 Vineland Road, Suite 350 Orlando, FL 32811	Remove
Manager	Kurt E. O'Brien	4901 Vineland Road, Suite 350 Orlando, FL 32811	Remove
Authorized Signatory	Kyle Schmutzler	4901 Vineland Road, Suite 350 Orlando, FL 32811	Remove

Title/Capacity	Name	Address	Type of Action
Manager	SS Mezzanine, LLC	701 Western Avenue, Glendale, CA 91201	Add
President	Nicholas Kangas	701 Western Avenue, Glendale, CA 91201	Add
Vice President and Treasurer	Terrance Spidell	701 Western Avenue, Glendale, CA 91201	Add
Vice President and Secretary	Nathaniel A. Vitan	701 Western Avenue, Glendale, CA 91201	Add
Vice President and Assistant Treasurer	Drew Adams	701 Western Avenue, Glendale, CA 91201	Add
Vice President and Assistant Secretary	Steven C. Babinski	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Sharon Linder	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Dan Fabricant	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Andres Friedman	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Michael McGowan	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Robbie Williams	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Albert Shaw	701 Western Avenue, Glendale, CA 91201	Add

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 CLERK OF STATE
 TALLAHASSEE, FLORIDA