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Certified Copies	Certificates	of Status
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Special Instructions to I	Filing Officer:	
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to amend the name, jurisdiction, or the registered agent, or any person identified in accordance with s. 605.0902 (1)(e), or a change in title or capacity of that person, for a foreign limited liability company authorized to transact business in Florida. The requirements are as follows:

- > Pursuant to s. 605.0907, Florida Statutes, the attached application must be completed in its entirety.
- A certificate from the state of jurisdiction evidencing the amendment must be submitted with the application. The certificate should be issued within the past 90 days.
- The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C." or the designation "LLC."
- The name of a limited liability company must be distinguishable on the records of the Florida Department of State. If you have changed the name of your limited liability company and the new name is not distinguishable on our records, you must adopt an alternate name to use in the state of Florida. To adopt an alternate name, you must submit a copy of the written consent of the managers or managing members adopting the alternate name. You may download a fill-in-the blank consent form from our website www.sunbiz.org.

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

The fees are as follows:

\$25.00 Filing Fee\$30.00 Certified Copy (optional)\$ 5.00 Certificate of Status (optional)

- A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.
- A COVER letter should be submitted along with the application, certificate, and check. The mailing address and courier address are noted below.
- Please send the application to:

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

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

CR2E055 (9/15)

## **COVER LETTER**

TO:	_		Section Corporations			
SUBJE	ECT:	SS NA	VARRE, LLC			
			Name of Foreig	gn Limited Lia	ability Co	mpany
Dear Si	ir or M	1adam	:			
The end	closed	applic	cation, certificate and fee(s)	are submitted	d for filing	).
Please	return	all coi	rrespondence concerning th	is matter to th	e followir	ng:
Steve B	abinsk	i				
		<u> </u>	Name of Person	-		
Public S	Storage				_	
			Firm/Company			
701 Wc	stern A	venue				
			Address			
Glendal	le, CA	91201				
			City/State and Zip Cod	e		
sbabins	ki@pul	blicstor	age.com			
E-ma	ail add	lress: (	to be used for future annua	l report notific	cation)	
For fur	ther in	ıforma	tion concerning this matter	, please call:		
Steve B	labinsk			_ at (	649 - 1	
		Nan	ne of Person	Area Coo	de & Dayt	time Telephone Number
	Maili	ng Add	ress:		Street A	.ddress:
			n Section		Registr	ration Section
Division of Corporations		Division of Corporations				
P.O. Box 6327		The Centre of Tallahassee				
	Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Encl	osed is	a check for the following	amount:		
<b>\$</b> 25			□ \$30 Filing Fee &	☐ \$55 Filin	g Fee &	□ \$60 Filing Fee,
	<b>-</b>	-	Certificate of Status	Certified	-	Certificate of Status & Certified Copy
CR2E05	5 (9/15)					

## 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)

Enter new principal office address, if applicable:	701 Western Avenue			
(Principal office address	Glendale, CA 91201	2023 ( ALL)		
<u>MUST BE A STREET ADDRESS)</u>		2023 OCT 17		
Enter new mailing address, if applicable: (Mailing address	701 Western Avenue	<u> </u>		
MAY BE A POST OFFICE BOX)	Glendale, CA 91201	4: 19 LOR OA		
2. The Florida document number of this limited lia	ability company is:M16000	002617		
3. Jurisdiction of its organization: Delaware				
4. Date authorized to do business in Florida:03/	29/2016			
SECTION II (5-9 complete only the applicable				
New name of the limited liability company:  (mus  (If name unavailable, enter alternate name adopted)		ompany, " "L.L.C.," or "LLC.")		
H name unavaliable, enter alternate name adopted	i for the purpose of transacting	g business in Florida and attach a alternate name. The alternate name		
copy of the written consent of the managers or ma	C." or "LLC.")			
copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.( 6. If amending the registered agent and/or registere	C." or "LLC.") ed officer address on our reco	rds, enter the name of the new		
copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.666. If amending the registered agent and/or registered agent and/or the new registered office as	C." or "LLC.") ed officer address on our reco	rds, enter the name of the new		
copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.66. If amending the registered agent and/or registered registered agent and/or the new registered office as Name of New Registered Agent:	C." or "LLC.")  ed officer address on our reco ddress here:			
copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.66. If amending the registered agent and/or registered registered agent and/or the new registered office as Name of New Registered Agent:	C." or "LLC.")  ed officer address on our reco ddress here:	ida Street Address		
copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.(6. If amending the registered agent and/or registered registered agent and/or the new registered office at Name of New Registered Agent:  New Registered Office Address:	C." or "LLC.")  ed officer address on our reco ddress here:			

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forementione	ider the law of which this	thenticated by the	official having custody of record	ds in the	2023 OCT 17 PM 4: 19
		Signature of the a	uthorized representative	ASS	T   7

### 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
Мападег	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,	Add
		Glendale, CA 91201	
President	Nicholas Kangas	701 Western Avenue,	Add
		Glendale, CA 91201	
Vice President and	Terrance Spidell	701 Western Avenue,	Add
Treasurer	·	Glendale, CA 91201	1
Vice President and	Nathaniel A. Vitan	701 Western Avenue,	Add
Secretary		Glendale, CA 91201	
Vice President and	Drew Adams	701 Western Avenue,	Add
Assistant Treasurer		Glendale, CA 91201	
Vice President and	Steven C. Babinski	701 Western Avenue,	Add
Assistant Secretary		Glendale, CA 91201	
Vice President	Sharon Linder	701 Western Avenue,	Add
		Glendale, CA 91201	
Vice President	Dan Fabricant	701 Western Avenue,	Add
		Glendale, CA 91201	1
Vice President	Andres Friedman	701 Western Avenue,	Add
		Glendale, CA 91201	
Vice President	Michael McGowan	701 Western Avenue,	Add
	_	Glendale, CA 91201	
Vice President	Robbie Williams	701 Western Avenue,	Add
		Glendale, CA 91201	
Vice President	Albert Shaw	701 Western Avenue,	Add
		Glendale, CA 91201	
		Glendale, CA 91201	

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