PAGE 01/05

Page 1 of 1

Florida Department of State

Division of Corporations Public Access System

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5926

Fax	Number 16	1 (850)222-1092 1 (850)878-5926		
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6/20/2005

	TRA	nsmittal letter	
TO: Registration Section Division of Corpo			
SUBJECT: UI	mL 10,LLC		
	(Name of	Limited Liability Company)	
The enclosed "Application Florida," Certificate of Eliability company to trans	xistence, and check a	d Liability Company for Authorization to Transact re submitted to register the above referenced foreign da	Business in 3n limited
Please return all correspo	ndence concerning th	nis matter to the following:	
	Nancy Ventre	•	
		(Name of Person)	
		frience of a report	
	U-Haul Internation	ai, inc.	
<u></u>		(Firm/Company)	_ <u>5</u> % 8
			도울 놀
	2721 N. Central Av	venue	製まり
		(Address)	FILED JUN 20 AM 10: 1 RETART OF STA LAHASSEE, FLOR
			FIR R
	Phoenia, Arizona 8	35004	문의 등
	(City	y/State and Zip Code)	<u> </u>
For further information oc	massius this matter	-leaseII.	9 m -
YAN INDUCT INTO WELLING OF	mendig and madel,	piease cau:	
Nancy Ventre		at (602) 263-6195	
	me of Person)	(Area Code & Daytime Telephone Numbe	ar)
CHEST THE SHOW I SHOW THE		•	
STREET ADDRESS: Registration Section		MAILING ADDRESS:	
Division of Corporations		Registration Section	
409 B. Gaines Street		Division of Corporations	
The state of the s			
ranguarses, Pinip	4 <i>74377</i>	Tallahassee, Florida 32314	
Enclosed is a check for the	following amount:		
☐ \$125.00 Filing Fee	☐ \$130 00 Filing Fee Certificals	The second of th	artificate Pertified Copy
Phase - correspond of Tayanan Online			

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	UHIL 10, LLC				
,		(Name of Foreign Limi	ted Lia	bility Company)	_
2.	Delaware		3.	20-2848992	_
	(Jurisdiction under the company is organized	o law of which foreign limited liabil	ity	(FEI number, if applicable)	_
4.	May 13, 2005		_ 5.	Perpetual	_
	(Date o	of Organization)	_	(Duration: Year limited liability company will cease to exist or "perpetual")	_
6.	Upon filing this				
		(Date first transacted business ((See sections 608.501 & 608.502	F.S. to	le, if prior to registration.) determine penalty liability)	-
7.	2721 N. Central /	venue			_
	Pitoenix, Arizona				. G
		(Street Add	ress of	Principal Office)	<u> </u>
8.	If limited liability	company is a manager-mana	ged co	empany, check here) N 20
9.	The name and us	ual business addresses of the n	nansg	ing members or managers are as follows:	
	Edward J. Shoen	2721 N. Central Avenue, Pho-	onix, A	rizona 85004	
	Jennifer M. Sent	es 2721 N. Central Avenue, Pho	enix, A	rizona 85004 P.	
	Gary B. Horton	2721 N. Central Avenue, Pho	enix, A	rizona 85004	•
the tran	icrisdiction under the islation of the certificat	low of which it is cognized. (A photo cunder onto of the translator must be a	copy is admitt	rold, duly authenticated by the official having custody of rec not acceptable. If the certificate is in a fireign language, a ed.) comoted in Florida: To Operate real property.	ordsin
•), FS., perjury Manage	<u> </u>	•

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 608.507, 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 Compa	any is:		
UHIL 10, LL	C			
2. The name an	nd the Florida street address o	of the registered a	gent and office are:	
	CT-	Corporation System		
		(Name)	, , , , , , , , , , , , , , , , , , ,	
	1200 5	South Pine Island Ro	ន្តថ	
	Florida Street Adde	ess (P.O. Box NOT	ACCEPTABLE)	
	Plantation	FL	33324	
		City/State/Zip		·····
liability company agent and agree relating to the pr	med as registered agent and to y at the place designated in th to act in this capacity. I fieth roper and complete performan y position as registered agent CT Corporation System (Signature)	is certificate, I he er agree to compl ice of my duties, a	reby accept the appoint by with the provisions a and I am familiar with	ntment as registered of all statutes and accept the

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERESY CERTIFY "UBIL 10, 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 EIGHTEENTH DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

3969865 8300 050409744



Variet Smith Hinden Harriet Smith Windson, Secretary of State
AUTHENTICATION: 3888705

DATE: 05-18-05