M15000004651

(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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2015 AUG 21 PM 2:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Gilligan AUG 21 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 12, 2015

AMY E. HOLMAN
U-HAUL INTERNATIONAL, INC.
2721 NORTH CENTRAL AVENUE 5S
PHOENIX, AZ 85004

SUBJECT: U-HAUL CO. OF FLORIDA 8, LLC
Ref. Number: M15000004651

We have received your document for U-HAUL CO. OF FLORIDA 8, LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document numbers does not match Florida records. You sent 3 different filing cover sheets for 8,9,10 however all three amendments forms are for U-Haul Co of Florida 8, LLC. Plus verify the Managers names you are adding and removing with Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan
Regulatory Specialist II

Letter Number: 715A00017044

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: U-Haul Co. of Florida 8, 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:

Nancy Ventre
Name of Person

U-Haul International, Inc.
Firm/Company

2721 N. Central Avenue
Address

Phoenix, Arizona 85004
City/State and Zip Code

linda_ahumada@uhaul.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nancy Ventre at (602) 263-6195
Name of Person — Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

CR2E055 (12/14)

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: U-Haul Co. of Florida 8, LLC

2. The Florida document number of this limited liability company is: M15000004651

3. Jurisdiction of its organization: Delaware

4. Date authorized to do business in Florida: June 11, 2015

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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 office 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:

Replacing two managers.

Title/ Capacity	Name	Address	Type of Action
			☐ Add
			☐ Remove
Manager	Lisa M. Pierro	1209 Orange Street	■ Add
		Wilmington, DE 19801	☐ Remove
Manager	Victor A. Duva	1209 Orange Street	■ Add
		Wilmington, DE 19801	☐ Remove
Manager	Richardo Beausoleil	1209 Orange Street	☐ Add
		Wilmington, DE 19801	■ Remove
Manager	Jennifer A. Schwartz	1209 Orange Street	☐ Add
		Wilmington, DE 19801	■ Remove

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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

Jennifer M. Settles

Typed or printed name of signee

Filing Fee: $25.00