I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made ur oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statut that my name appears above, or on an attachment with all other like empowered.	
SIGNATURE: ANGELA JOHNSON	04/23/2024

DOCUMENT# L19000210058

Entity Name: SHADY OAKS STORAGE LLC

## Current Principal Place of Business:

1765 TIONIA RD NEW SMYRNA BEACH, FL 32168

# **Current Mailing Address:**

5570 N HWY 1 COCOA, FL 32927 US

# FEI Number: 84-3012677

# Name and Address of Current Registered Agent:

JOHNSON, ANGELA C 5570 N HWY 1 COCOA, FL 32927 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

#### SIGNATURE: ANGELA C JOHNSON

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title	MGR
Name	JOHNSON, ANGELA C
Address	5570 N HWY 1
City-State-Zip:	COCOA FL 32927

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 23, 2024 Secretary of State 6809211347CC

Certificate of Status Desired: No

04/23/2024

Date

Date