

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000001792

Entity Name: EVEREST STORAGE MANAGER II, LLC**Current Principal Place of Business:**199 SOUTH LOS ROBLES AVE., #200
PASADENA, CA 91101**Current Mailing Address:**199 SOUTH LOS ROBLES AVE., #200
PASADENA, CA 91101 US**FEI Number:** 95-4763728**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name EVEREST STORAGE HOLDINGS, LLC
Address 199 SOUTH LOS ROBLES AVE., #200
City-State-Zip: PASADENA CA 91101

Title PRESIDENT, COO
Name KOHORST, KEVIN
Address 199 SOUTH LOS ROBLES AVE., #200
City-State-Zip: PASADENA CA 91101

Title CHARIMAN, CEO
Name LESSER, DAVID I.
Address 199 SOUTH LOS ROBLES AVE., #200
City-State-Zip: PASADENA CA 91101

Title SVP, GC, SECRETARY
Name DAVIS, CHRISTOPHER K.
Address 199 SOUTH LOS ROBLES AVE., #200
City-State-Zip: PASADENA CA 91101

Title SVP, CFO
Name WILKINSON, PETER J.
Address 199 SOUTH LOS ROBLES AVE., #200
City-State-Zip: PASADENA CA 91101

Title VP
Name KOHORST, MATTHEW
Address 199 SOUTH LOS ROBLES AVE., #200
City-State-Zip: PASADENA CA 91101

Title VP
Name VALDERHAUG, ERIK
Address 199 SOUTH LOS ROBLES AVE., #200
City-State-Zip: PASADENA CA 91101

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 under 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 Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER K DAVIS

SVP

02/07/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date