2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000004651

Entity Name: U-HAUL CO. OF FLORIDA 8, LLC

Current Principal Place of Business:

2727 N. CENTRAL AVE. PHOENIX, AZ 85004

Current Mailing Address:

2721 N. CENTRAL AVE. 5-SOUTH PHOENIX, AZ 85004

FEI Number: 47-4214380

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US Certificate of Status Desired: No

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

Authorized Person(s) Detail :

/			
Title	MGR	Title	MGR
Name	TAYLOR, JOHN C	Name	SHOEN, EDWARD J
Address	2727 N. CENTRAL AVE., 5-SOUTH	Address	2727 N. CENTRAL AVE., 5-SOUTH
City-State-Zip:	PHOENIX AZ 85004	City-State-Zip:	PHOENIX AZ 85004
Title	MANAGER	Title	MANAGER
Name	DUVA, VICTOR A	Name	PIERRO, LISA M
Address	1209 ORANGE STREET	Address	1209 ORANGE STREET
City-State-Zip:	WILMINGTON DE 19801	City-State-Zip:	WILMINGTON DE 19801
Title	MANACED		
nue	MANAGER		
Name	BERG, JASON A		
Address	2727 N. CENTRAL AVENUE		
City-State-Zip:	PHOENIX AZ 85004		
	Title Name Address City-State-Zip: Title Name Address City-State-Zip: Title Name Address	NameTAYLOR, JOHN CAddress2727 N. CENTRAL AVE., 5-SOUTHCity-State-ZiePHOENIX AZ 85004TitleMANAGERNameDUVA, VICTOR AAddress1209 ORANGE STREETCity-State-ZieWILMINGTON DE 19801TitleMANAGERNameBERG, JASON A	TitleMGRTitleNameTAYLOR, JOHN CNameAddress2727 N. CENTRAL AVE., 5-SOUTHAddressCity-State-Zip:PHOENIX AZ 85004City-State-Zip:TitleMANAGERTitleNameDUVA, VICTOR ANameAddress1209 ORANGE STREETAddressCity-State-Zip:WILMINGTON DE 19801City-State-Zip:TitleMANAGERLity-State-Zip:TitleMANAGERSity-State-Zip:City-State-Zip:WILMINGTON DE 19801City-State-Zip:TitleMANAGERSity-State-Zip:NameBERG, JASON ALity-State-Zip:Address2727 N. CENTRAL AVENUELity-State-Zip:

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: JOHN C TAYLOR

MANAGER

04/18/2018

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 18, 2018 Secretary of State CC7161478679

Date