

A95000001607



ACCOUNT NO. : 072100000032
REFERENCE : 352962 5032822
AUTHORIZATION :
COST LIMIT : \$ 35.00

Patricia Pizut

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
99 AUG 27 AM 11:18

ORDER DATE : August 24, 1999
ORDER TIME : 3:16 PM
ORDER NO. : 352962
CUSTOMER NO: 5032822
CUSTOMER: Ms. Cathy Kotowski
Public Storage, Inc.
701 Western Avenue
Glendale, CA 91201

200002972832--4

CHANGE OF AGENT

NAME: STORAGE TRUST INVESTMENTS-
FLORIDA, LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

99 AUG 27 PM 3:56

RECEIVED

BM
8/27/99

LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

SECRETARY OF STATE
DIVISION OF CORPORATIONS
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1. Storage Trust Investments-Florida, Limited Partnership
Name of the limited partnership

2. October 25, 1995 Date of filing/registration in Florida
3. A95000001607 Document number assigned

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CT Corporation System
Name
1200 South Pine Island Road
Address
Plantation, FL 33324
City, State and Zip

5. The name and address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box not acceptable)
Tallahassee, FL 32301
City, State and Zip

6. Such change(s) was/were authorized by the general partners.

M. Moffitt STR Management Corp. of Florida, GP
Signature of General Partner By: Michele Moffitt, Vice President

I hereby accept the appointment as registered agent and agree to act in this capacity. If 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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.

Corporation Service Company
By: Vivien S. Mitchell
Signature of Registered Agent
Vivien S. Mitchell, Assistant Vice President

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
Filing Fee: \$35.00**