

CT CORPORATION SYSTEM

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FILED  
01 JUL -5 PM 1:50  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

CORPORATION(S) NAME

PMSI - SLB No. 1 Limited

0

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-07/05/01--01065--009  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

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|---|---|---|
| <input type="checkbox"/> Profit                         | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger             |
| <input type="checkbox"/> Nonprofit                      |   |   |
| <input checked="" type="checkbox"/> Foreign             | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark               |
|   | <input type="checkbox"/> Reinstatement          |   |
| <input checked="" type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other              |
| <input type="checkbox"/> LLC                            | <input type="checkbox"/> Name Registration      | <input type="checkbox"/> Change of RA       |
|   | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                |
| <input type="checkbox"/> Certified Copy                 | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                |
| <input type="checkbox"/> Call When Ready                | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30         |
| <input checked="" type="checkbox"/> Walk In             | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out                       |   |   |

Name \_\_\_\_\_  
Availability \_\_\_\_\_  
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Examiner \_\_\_\_\_  
Updater \_\_\_\_\_  
Verifier \_\_\_\_\_  
W.P. Verifier \_\_\_\_\_

7/5/01

Order#: 4634582

BK Ref#: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

RECEIVED  
01 JUL -5 AM 11:14  
DIVISION OF CORPORATION

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

Florida Department of State, Sandra B. Mortham, Secretary of State

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. PM SI - SLB NO. 1 LIMITED  
(Name of limited partnership as it is in the home state)

2. \_\_\_\_\_  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. TEXAS  
(State of Formation)

4. JUNE 28, 2001  
(Date of Formation)

5. C T Corporation System  
(Name of Registered Agent for Service of Process)

6. c/o C T Corporation System, 1200 South Pine Island Road  
(Street Address of Registered Office)

Plantation, Florida 33324  
(City) (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:  
C T Corporation System

*Victor Alfano*  
(Agent must sign on this line)

**VICTOR ALFANO  
ASSISTANT SECRETARY**

8. 10575 WESTOFFICE DRIVE HOUSTON TEXAS 77042  
(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

STORAGE REALTY L.L.C. 10575 WESTOFFICE DRIVE  
M97000000054 HOUSTON, TX 77042

10. 10575 WESTOFFICE DRIVE HOUSTON, TEXAS 77042  
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. 10575 WESTOFFICE DRIVEHOUSTON TX 77042

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 2<sup>nd</sup> day of JULY, 192001

STORAGE REALTY L.L.C.By: Doug Mulvaney

General Partner

DOUG MULVANEY  
PRESIDENTSTATE OF TEXASCOUNTY OF HARRISOn this 2nd day of July, 192001Doug Mulvaney

personally appeared before me,

☒ who is personally known to me☐ whose identity I proved on the basis of \_\_\_\_\_Marilyn J. Brown  
(Notary Public Signature)Marilyn J. Brown  
(Notary's Printed Name)

Seal

My Commission Expires: 3-18-04

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

BEFORE ME, the undersigned, personally appeared Doug Mulvaney, President Storage Realty LLC,  
 general partner of PMSI-SLB NO. 1 LIMITED, a (an) Texas, limited partnership, hereinafter referred to as the "Partnership" who  
 certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 9,900.00
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 3,300.00

This 2nd day of JULY, 2001

**FURTHER AFFIANT SAYETH NOT.**

Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.

General Partner  
STORAGE REALTY L.L.C.

By: Doug Mulvaney, President

STATE OF Texas  
 COUNTY OF HARRIS  
 DATE 7/2/01

BEFORE ME, the undersigned officer, a Notary Public authorized to administer oaths and to take acknowledgments in and for the State and County set forth above, personally appeared Doug Mulvaney (General Partner, known to me and known by me to be the person who executed the foregoing Affidavit of Capital Contributions, and he acknowledged to me and before me that he executed this Affidavit as General Partner of said partnership.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 2nd day of July, 2001

Marilyn J. Brown  
 Notary Public

State of Texas at Large  
 My Commission Expires:  
3/18/04

