# B100000205

(Requestor's Name)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Enuty Name)			
(Document Number)			
Certified Copies Certificates of Status			
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DIVISION OF COMPONENTION

# **COVER LETTER**

Tallahassee, FL 32301

COVER LETTER			
TO: Registration Division of C		•	*
SUBJECT: HANO	ER HOLDINGS, LTD.		<u> </u>
1	Name of Foreign Limited Part	nership or Limited L	Liability Limited Partnership
partnership to transac			register a foreign limited partnership or limited liability limited
CHRISTOPHER	P MILLER		
	Contact Person		-
HANOVER HOL	DINGS, LTD.		
,	Firm/Company		-
2828 ROUTH \$	ST., SUITE 500		
	Address		-
DALLAS, TX 75	201		
	City, State and Zip Code		-
	TORAGE@GMAIL.COM		_
E-mail address: (to	be used for future annual repo	rt notification)	
For further information	n concerning this matter, plea	ise call:	
CHRISTOPHER	PMILLER	_at (904	268-5441
Name of Co.	ntact Person		nd Daytime Telephone Number
Enclosed is a check for	or the following amount:		
\$1,000.00 Filing Fee (\$965 Filing Fee and \$35 Registered Agent Fee)	and Certificate of	\$1,052.50 Filing and Certified Cop	
STREET ADDRESS Registration Section Division of Corporation Clifton Building 2661 Executive Center	ons	MAILING ADDI Registration Section Division of Corpo P. O. Box 6327 Tallahassee, FL 3	on prations

## APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

FILEU SECRETARY OF SUATE DIVISION OF CURPORATION

1. HANOVER HOLDINGS, LTD.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must in 10.156/fb.) AM 10: 22

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

# LORETTO SELF STORAGE LTD

If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix.

business in Florida; must contain acceptable suffix.				
2. TEXAS	3. NOVEMBER 19, 1999			
State or Country of Formation	Date of Formation			
4. Name of Registered Agent for Service of Process and Fl	orida Street Address:			
CHRISTOPHER P MILLER				
5509 SHAD RD.				
JACKSONVILLE, FL 32257				
5. I hereby accept the appointment as registered agent and ag of all statutes relative to the proper and complete performany position as registered agent.	gree to act in this capacity. I further agree to comply with the provisions ance of my duties, and I am familiar with and accept the obligations of			
Signature	of Registered Agent			
7. Principle Office: (Florida Street Address)	8. Mailing Address:			
LORETTO SELF STORAGE	LORETTO SELF STORAGE			
5509 SHAD RD.	5509 SHAD RD.			
JACKSONVILLE, FL 32257	JACKSONVILLE, FL 32257			
9. If limited partnership is a limited liability limited partn	ership, check box			
10. Name, principal office address, and mailing address of	each general partner:			
Name of General Partner: CHRISTOPHER P MILLER	Name of General Partner:			
Street Address: 2828 ROUTH ST., SUITE 500	Street Address:			
DALLAS, TX 75201				
Mailing Address:	Mailing Address:			
Name of General Partner:	Name of General Partner:			
Street Address:	Street Address:			
Mailing Address:	Mailing Address:			

Name of General Partner:	Name of General Partner:			
Street Address:	Street Address:			
Mailing Address:	Mailing Address:			
11. Effective date, if other than the date of filing: DECEMBER 16, 2010 (Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)				
	not more than 90 days prior to the delivery of this application to the er official having custody of the entity's records in the jurisdiction under			
Signed this 16TH day of DECEMBER	R ,20 10			
Signa	ture of a general partner			
The individual signing this document affirm that the facts sta	ated herein are true and the individual is aware that false information			

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false in submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional): Certificate of Status (optional):

\$52.50

\$8.75

Page 2 of 2

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Phil Wilson Secretary of State

# Office of the Secretary of State

### Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate Of Limited Partnership for HANOVER HOLDINGS, LTD. (file number 12677310), a Domestic Limited Partnership (LP), was filed in this office on November 19, 1999.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 26, 2007.



Phil Wilson Secretary of State

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