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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

FLORIDA/FOREIGN LP/LLLP

Extra Space Properties Ninety Four LP

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$1,000.00

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CT CORPORATION

COVER LETTER TQ: Registration Section Division of Corporations Extra Space Properties Ninety Pour LP SUBJECT: Name of Foreign Limited Partnership or Limited Liability Limited Partnership The enclosed application, certificate of status and fees are submitted to register a foreign limited parmembip or limited liability limited partnership to transact business in Florids. Please return all correspondence concerning this matter to: Jed K. Burton Contact Person Extra Space Properties Ninety Four LP Firm/Company 2795 East Cottonwood Parkway, #400 Address Salt Lake City, UT 84121 City, State and Zip Code финтиксоп@охітавраси.ост E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 562-5556 Jed K. Burton 108 Name of Contact Person Area Code and Daytime Telephone Number Enclosed is a check for the following amount: □ \$1,000.00 Filing Fccs □ \$1,008.75 Filing Fccs ☐ \$1,052.50 Filing Fccs U \$1,061,25 Filling Fee, (\$965 Filing Fee and und Cartificate of and Certified Copy Certified Copy, and \$35 Registered Agent Certificate of Status Status

> MAILING ADDRESS: Registration Section
> Division of Corporations

Tallabassee, FL 32314

P. O. Box 6327

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Fee)

STREET ADDRESS:

Tailahussee, FL 32301

2661 Executive Center Circle

Registration Section Division of Corporations Clifton Building

# FILEO

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### Application by foreign limited partnership or Limited Liability Limited partnership to transact business in Florida

Extra Space Properties Ninety Four LP  (Name of Limited Partnership or Limited Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, LP., LP, or Ltd. Acceptable Limited Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.			
If name unavailable, na	me under which the limited ; business in	partnership or limited liability limited partnership proposes to regular florida; must contain acceptable suffix.	iter to transact
2. Pennsylvania	ů	3. January 14, 2004	
State	or Country of Formation entification Number: 20-06	Date of Formation	
		es and Florida Street Address:	
C T Corporation System	=		
1200 South Pine Island	Road	-	
Plantation, Florida 3332	4	_	
of all statutes relative my position as register	to the proper and complete, red agent.	ent and agree to uct in this capacity. I further agree to comply with performance of my duties, and I am familiar with and accept the oution future.  TROY TO LARD, ASSI. Secretury agreement of Registered Agent	CRETARY OF STATE LAHASSEE.FLORID.
7. Principal Office:	•	8. Muiling Address:	<u> </u>
2795 East Cotonwood I	Parkwey, #400	2795 East Cottonwood Parkway, #400	
Sait Lake City, UT 8412	1	Suit Lake City, UT 84121	R D H
•	•	ted partnership, check box .  .ddress of each general partner:	
	• • • • • • • • • • • • • • • • • • • •	nety Four OP LCC Names of General Partner.	
270	runar:95 East Cottonwood Purkwa		
Street Address:		Street Address:	
*	it Lake City, UT 84121		
Mailing Address:	95 Rust Cottonwood Parkwa	ny, #40 Mailing Address:	
Su	it Lako City, UT 84121		
Name of General Par	rpier;	Name of General Partner:	
Street Address:		Street Address:	
Mailing Address		Mailing Address:	

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Nume of General Partner:	Page 1 of 2 Name of General Partners
Street Address:	Street Address:
Mailing Address:	Mailing Address:
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after	r the data this document is filed by the Florida Department of State.)
12. Attached is a certificate of existence duly authenticated, r Florida Department of State, by the Secretary of State or othe the law of which it is organized.  Signed this	not more than 90 days prior to the delivery of this application to the entity's records in the jurisdiction under
Signat	nva of a generally ariner
	es Manager of Saint Spice Properties Ninety Four OP LLC ted herein ere true and the individual is aware that false information as a third degree felony as provided for in s.817.155, F.S.
Filing Fees: Certified Copy (optional): Certificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

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## COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF STATE NOVEMBER 13, 2012

TO ALL WHOM THESE PRESENTS SHALL COME, GREETING:

I DO HEREBY CERTIFY THAT,

## Extra Space Properties Ninety Four LP

is duly registered as a Pennsylvania Limited Partnership under the laws of the Commonwealth of Pennsylvania and remains subsisting so far as the records of this office show, as of the date herein.

I DO FURTHER CERTIFY THAT, This Subsistence Certificate shall not imply that all fees, taxes, and penalties owed to the Commonwealth of Pennsylvania are paid.



IN TESTIMONY WHEREOF, I have hereunto set my hand and caused the Seal of the Secretary's Office to be affixed, the day and year above written.

Secretary of the Commonwealth

Certification Number: 10877812-1 Verify this certificate online at http://www.corporations.state.pa.us/corp/soskb/verify.asp

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