B1700000137

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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J. HARRIS





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Date: June 01, 2017	Account#: 12000000088
Name: Michelle Walker	
Reference #: A296157	
Entity Name: BLUE DOORS STORAGE FU	ND II, L.P.
✓ Articles of Incorporation/Authorization to Trans	act Business
☐ Amendment	1 2 2 not
☐ Change of Agent	Jease The Ind
Reinstatement	Jease
Conversion	
☐ Merger	
☐ Dissolution/Withdrawal	
☐ Fictitous Name	
Other CERTIFIED COPY	UPON FILING
Please include a copy of cover letter with ret	urned evidence. Thanks!
Authorized Amount:	Please note: If authorized amount is incorrect please call Michelle at 518-213-0737.
Signature: Mandle Walker	<u>-</u>



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 1, 2017

COGENCY GLOBAL MICHELLE WALKER

SUBJECT: BLUE DOORS STORAGE FUND II, L.P.

Ref. Number: W17000046103

We have received your document for BLUE DOORS STORAGE FUND II, L.P. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 317A00010936

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

TO TRANSACT BUSINESS IN FLORIDA

1. Blue Doors Storage Fund II, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)

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. 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. , Delaware State or Country of Formation 4. Federal Employer Identification Number: 47-1913727 5. Name of Registered Agent for Service of Process and Florida Street Address: Cogency Global Inc. 115 North Calhoun Street, Suite 4 Tallahassee, FL 32301 6. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete ferformence of my duties, and I am familiar with and accept the obligations of my position as registered agent. - AJST. SEC Signature of Registered Agent 7. Principal Office: 8. Mailing Address: 725 Park Center Drive 725 Park Center Drive Matthews, NC 28105 Matthews, NC 28105 9. If limited partnership is a limited liability limited partnership, check box . 10. Name, principal office address, and mailing address of each general partner: M1700000 47 27 Name of General Partner:__Blue Doors Storage II GP, LLC Name of General Partner;_ Street Address: 725 Park Center Drive Street Address: Matthews, NC 28105 Mailing Address: Mailing Address: Name of General Partner:_______ Name of General Partner:_____ Street Address: Street Address: _____ Mailing Address: _ Mailing Address:_

Name of General	Partner:	Page 1 012 Name of General Partner:
Street Address:		Street Address:
Mailing Address:		Mailing Address:
11. Effective date, if (Effective date cannot	other than the date of filing:	ys after the date this document is filed by the Florida Department of State.)
12. Attached is a certi	ficate of existence duly authentic State, by the Secretary of State of	cated, not more than 90 days prior to the delivery of this application to the or other official having custody of the entity's records in the jurisdiction under
Signed this	day of MA	rs Storage If GP, LLC
The individual signing	By: Wesley G this document affirm that the fa	Signature of a general partner Carter, Chief Financial Officer cts stated herein are true and the individual is aware that false information institutes a third degree felony as provided for in s.817.155, F.S.
Cer	ng Pees: tified Copy (optional): tificate of Status (optional):	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee) \$52.50 \$8.75

Page 2 of 2

2017 JUN -2 AN 8: 25 SECRETARY OF STATE

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "BLUE DOORS STORAGE FUND II, L.P." IS

DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF MAY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BLUE DOORS STORAGE FUND II, L.P." WAS FORMED ON THE TWENTY-SEVENTH DAY OF AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 202626153

Date: 05-31-17