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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023

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: (954)208-0845

Fax Number

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

Fmail.	Address:			

REGISTERED AGENT CHANGE MOBILE MINI, INC.

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ALBRITTON

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By:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation or	0502, 607,1508, or 617,1508, Florida Statutes, this gamized under the laws of the State of Delaware gistered agent, or both, in the State of Florida.			
1. The name of t	he corporation: MOBILE MINI, INC				
2. The principal	office address: 4646 E. Van Buren St.,	Suite 400			
	Phoenix, AZ 85008				
3. The mailing a	ddress (if different):				
4. Date of incorporation/qualification: 02/25/2000 Document number: F00000001033					
	street address of the current registers tment of State: (If resigned, enter resi	ed agent and registered office on file with the igned)			
	CORPORATION SERVICE COMPA	NY			
1201 HAYS STREET					
	TALLAHASSEE, FL 32301	ALL ALL			
6. The name and (if changed):	street address of the new registered a	agent (if changed) and /or registered office			
	C T Corporation System	Eist 6.			
	1200 South Pine Island Road	THE ST.			
	P.O Plantation, Florida 33324). Box. NOT acceptable			
The street addre	ss of its registered office and the str be identical.	reet address of the business office of its registered agent,			
Such change wa authorized by th	s authorized by resolution duly adop e board, or the corporation has been	pted by its board of directors or by an officer so inotified in writing of the change.			
73	t	Lisa DuBois, Vice President			
I hereby accept I further agree to of my duties, and document is bein	It i am familiar with and accept the ng filed merely to reflect a change it been noutied in writing of this char	Printed or typed name and title I and agree to act in this capacity. Statutes relative to the proper and complete performance obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the age.			
	XV	02/16/2022			
Sign If signing on bel	nalif of an entity:	Date			
Ту	ped or Printed Name				