

F16000001434

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DEC 04 2023

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Briarcliff Self Storage, Inc.

Name of Corporation

DOCUMENT NUMBER: F16000001434

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melody Lankford, Attorney

Name of Contact Person

Heidi S. Webb

Firm/Company

210 South Beach Street, Suite 202

Address

Daytona Beach, FL 32114

City/State and Zip Code

mlankford@lankfordlawfirm.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melody Lankford

at (\$50 264-7004)

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy

Mailing Address:

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address:

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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**PROFIT CORPORATION**  
**APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR**  
**AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**  
(Pursuant to s. 607.1504, F.S.)

**SECTION I**  
**(1-3 MUST BE COMPLETED)**

F16000001434

(Document number of corporation (if known))

1. Briarcliff Self Storage, Inc.  
(Name of corporation as it appears on the records of the Department of State)
2. New York 3. 03/28/2016  
(Incorporated under laws of) (Date authorized to do business in Florida)

**SECTION II**  
**(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)**

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 06/09/2023
5. Quattro Castiglione Regina Inc.  
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address: \_\_\_\_\_, Florida \_\_\_\_\_  
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Signature of New Registered Agent, if changing

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TALLAHASSEE, FL

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

DocuSigned by:

*Christina M Castiglione*

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Christina M Castiglione

(Typed or printed name of person signing)

CEO, President

(Title of person signing)

**FILING FEE \$35.00**

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name:	QUATTRO CASTIGLIONE REGINA INC.
DOS ID Number:	2118768
Entity Type:	DOMESTIC BUSINESS CORPORATION
Entity Status:	EXISTING
Date of Initial Filing with DOS:	03/04/1997
Statement Status:	CURRENT
Statement Due Date:	03/31/2025

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State,  
at the City of Albany, on November 29, 2023 at 11:25 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

*Brendan C. Hughes*

By Brendan C. Hughes  
Executive Deputy Secretary of State

Authentication Number: 100004737154 To Verify the authenticity of this document you may access the  
Division of Corporation's Document Authentication Website at <http://ccorp.dos.ny.gov>

**STATE OF NEW YORK  
DEPARTMENT OF STATE**

I hereby certify that the annexed copy for QUATTRO CASTIGLIONE REGINA INC., File Number 231017002742 has been compared with the original document in the custody of the Secretary of State and that the same is true copy of said original.

WITNESS my hand and official seal of the  
Department of State, at the City of Albany,  
on November 29, 2023.



*Brendan C. Hughes*

Brendan C. Hughes  
Executive Deputy Secretary of State



Division of Corporations,  
State Records and  
Uniform Commercial Code

New York State  
Department of State  
DIVISION OF CORPORATIONS,  
STATE RECORDS AND  
UNIFORM COMMERCIAL CODE  
One Commerce Plaza  
99 Washington Ave.  
Albany, NY 12231-0001  
www.dos.ny.gov

CERTIFICATE OF AMENDMENT  
OF THE  
CERTIFICATE OF INCORPORATION  
OF

BRIARCLIFF SELF STORAGE, INC.

*(Insert the Current Name of Domestic Corporation)*

Under Section 805 of the Business Corporation Law

FIRST: The current name of the corporation is:  
BRIARCLIFF SELF STORAGE, INC.

If the name of the corporation has been previously changed, the name under which it was  
originally formed is:

N/A

SECOND: The date of filing of the certificate of incorporation with the Department of State is:  
03/04/1997

THIRD: The amendment effected by this certificate of amendment is as follows:

The subject matter and full text of each amended paragraph must be stated

FOR EXAMPLE, a certificate of amendment changing the name of the corporation would read as follows:

Paragraph [FIRST] of the Certificate of Incorporation relating to the name of the corporation is amended to read in its entirety as follows:

[FIRST: The name of the corporation is QUATTRO CASTIGLIONE REGINA INC.]

Paragraph FIRST of the Certificate of Incorporation relating to  
the name of the corporation

is amended to read in its entirety as follows:

FIRST: The name of the corporation is QUATTRO CASTIGLIONE REGINA INC.

Paragraph \_\_\_\_\_ of the Certificate of Incorporation relating to

is amended to read in its entirety as follows:

FOURTH: The certificate of amendment was authorized by: *(Check the appropriate box)*

- ☐ The vote of the board of directors followed by a vote of a majority of all outstanding shares entitled to vote thereon at a meeting of shareholders.
- ☒ The vote of the board of directors followed by the unanimous written consent of the holders of all outstanding shares.

  
*(Signature)*

CHRISTINA CASTIGLIONE

*(Name of Signer)*

CEO, PRESIDENT, DIRECTOR

*(Title of Signer)*



CERTIFICATE OF AMENDMENT  
OF THE  
CERTIFICATE OF INCORPORATION  
OF

BRIARCLIFF SELF STORAGE, INC.

*(Insert Current Name of Domestic Corporation)*

Under Section 805 of the Business Corporation Law

Filer's Name and Mailing Address:

Heidi Webb, Attorney

*Name*

*Company, if Applicable*

210 South Beach Street, Suite 202

*Mailing Address*

Daytona Beach, FL 32114

*City, State and Zip Code*

NOTES:

1. The name of the corporation and its date of incorporation provided on this certificate must exactly match the records of the Department of State. This information should be verified on the Department of State's website at [www.dos.ny.gov](http://www.dos.ny.gov).
2. This form was prepared by the New York State Department of State. It does not contain all optional provisions under the law. You are not required to use this form. You may draft your own form or use forms available at legal stationery stores.
3. The Department of State recommends that all documents be prepared under the guidance of an attorney.
4. The certificate must be submitted with a \$60 filing fee.

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