



F96000002628

ACCOUNT NO. : 072100000032

REFERENCE : 473116 5032822

AUTHORIZATION : *Patricia Pujat*

COST LIMIT : \$ 35.00

ORDER DATE : July 23, 1997

ORDER TIME : 10:27 AM

ORDER NO. : 473116-005

CUSTOMER NO: 5032822

200002280892--7

CUSTOMER: Ms. Deborah Ghamlouch
Public Storage, Inc.
701 Western Avenue, #200
Glendale, CA 91201

CHANGE OF AGENT

NAME: HFAC TWO, INC.

97 SEP -8 PM 3:24
SECRETARY OF STATE
TALLAHASSEE FLORIDA

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY

CONTACT PERSON: Kim Clemons

9/8
Jon R.A. Change

Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of CALIFORNIA submits the following statement in order to change its registered office or registered agent, or both, in the State Florida.

1a. The name of the corporation is: _____

HFAC TWO, INC.

1b. Date of incorporation: 12/15/95 Document number _____

2. The name and address of the current registered agent and office:

C T CORPORATION SYSTEM

1200 SO. PINE ISLAND DRIVE PLANTATION FL 33324

3. The name and address of the new registered agent and office:

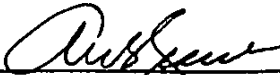
(P.O. Box Not Acceptable)

CORPORATION SERVICE COMPANY

1201 Hays Street, Tallahassee, Florida 32301

The street address of its registered agent and the street address of the business office of its registered agent as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.



SIGNATURE

AUG 20 1997

DATE

Obren B. Gerich Vice President

Typed or printed name and title

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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 PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATION OF MY POSITION AS REGISTERED AGENT.

CORPORATION SERVICE COMPANY

VICKI SCHREIBER

SIGNATURE

By:

Vicki Schreiber

DATE

8/14/97