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DIVISION OF CORPORATIONS

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T. HAMPTON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: May 16, 2013

Order#: 648496/002

Re: Ala SELF STORAGE MANAGEMENT, LC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Vera M. Norris c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508. Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: A1A SELF STOR	AGE MANAGEMENT, LC
 (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) (b) Mailing address of limited liability company: 	Suite 201 Roackville, MD 20850
(Note: MAY BE POST OFFICE BOX)	
02/04/2002	L02000002638
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Andrew F. Moran
Registered Office Address:	300 International Parkway, Suite 270 Heathrow, FL 32746
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	V Registered Office address: Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassee ,FL 32301
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	orida street address of the registered office
Richard P. Moran, Jr. Authorized Person Printed or typed name of signee	AR OF S
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the pro and I am familiar with and accept the obligations of my pos Chapter 608. F.S. Or, if this document is being filed to men address, I hereby confirm that the limited liability company	gree to act in this capacity. I further agree to per and complete performance of my futies sition as registered agent as provided for intelligence of the last change in the registered office has been notified in writing of this change.
By: Corporation Service Company	Sylvia Queppet, Asst. VP
Division of Cornerations P.O. Roy 63'	

FILING FEE: \$25.00