

L02000007437

GRAYHARRIS
ATTORNEYS AT LAW

GRAY, HARRIS & ROBINSON, P.A.
SUITE 600
SOUTH BRONOUGH ST. (32301)
P.O. BOX 11189
TALLAHASSEE, FLORIDA 32302-3189
TEL 850-222-7717
TEL 850-577-9090
FAX 850-222-3494
FAX 850-577-3311
WEB grayharris.com

April 23, 2002

E-MAIL ADDRESS

Division of Corporations
George Firestone Building
409 East Gaines Street
Tallahassee, FL 32301

Via Hand Delivery

To Whom It May Concern:

Enclosed for filing, please find **STATEMENT OF CHANGE OF REGISTERED AGENT FOR LIMITED LIABILITY COMPANY** and the applicable filing fees for the following entity:

USA STOR-A-WAY HERNDON GP, LLC
Document Number: L02000007437

900005327129--3
-04/23/02-01021-026
*****35.00 *****25.00

Upon receipt, please "date-stamp" the copy of the letter provided and call me at 222-7717, when the document is ready. Thank you for your assistance in this matter.

Very truly yours,

Jill May
Jill W. May, Paralegal

Name	
Availability	
Document Examiner	DCC
Enclosures	
Updater	DCC
Updater Verifier	DCC
Acknowledgement	DCC
W. P. Verifier	DCC

FILED
02 APR 23 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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. The name of the limited liability company is: USA STOR-A-WAY HERNDON GP, LLC

2. The mailing address of the limited liability company is : 4051 W. State Road 46

Sanford, FL 32771

March 28, 2002

L02000007437

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Gary V. Cardamone

Name

4051 W. State Road 46

Address

Sanford, FL 32771

City, State and Zip

6. The name and address of the new registered agent and/or office:

Michael E. Wright

Name

301 E. Pine Street, Suite 1400

Florida street address (P.O. Box NOT acceptable)

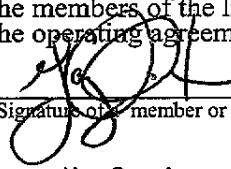
Orlando

FL

32801

City, State and Zip

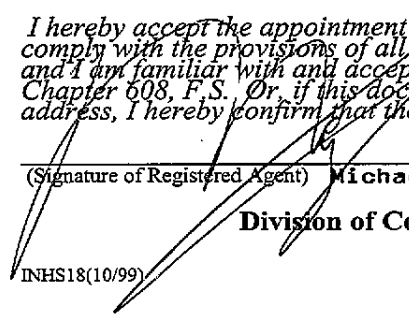
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


(Signature of member or authorized representative of a member)

Gary V. Cardamone

(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


(Signature of Registered Agent) Michael E. Wright

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

INHS18(10/99)

FILING FEE: \$25.00

02 APR 23 9:36 19
SECRETARY
TALLAHASSEE
FILED