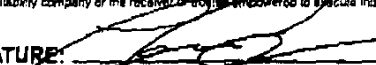


2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L03000000580																																																																																																															
1. Entity Name AEGIS STORAGE, L.L.C.																																																																																																															
Principal Place of Business 2717 E. OAKLAND AVENUE ATTN: ROBERT L. WEAVER JOHNSON CITY, TN 37601		Mailing Address 2717 E. OAKLAND AVENUE ATTN: ROBERT L. WEAVER JOHNSON CITY, TN 37601																																																																																																													
2. Principal Place of Business - No P.O. Box # 904 N. STATE OF FRANKLIN RD PO BOX 5238 Sarasota, FL, etc.		3. Mailing Address PO BOX 5238 Sarasota, FL, etc.																																																																																																													
City & State JOHNSON CITY, TN		City & State JOHNSON CITY, TN																																																																																																													
Zip 37604		Country US																																																																																																													
4. FE Number 65-1170808		Applicant For Not Applicable																																																																																																													
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required																																																																																																													
6. Name and Address of Current Registered Agent MYERS, TROY H JR 2033 MAIN STREET, SUITE 800 SARASOTA, FL 34237		7. Name and Address of New Registered Agent Name ANDRE' K. R. CHARBONNEAU, ESQ. Street Address (P.O. Box Number is Not Acceptable) 2033 MAIN ST STE 600 City SARASOTA FL Zip Code 34237																																																																																																													
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.																																																																																																															
SIGNATURE 		5/3/07																																																																																																													
FILE NOW!! FEE IS \$100.00		In accordance with s. 607.192(2)(b), F.S., the limited liability company did not receive the prior notice.																																																																																																													
Major check payable to Florida Department of State																																																																																																															
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES																																																																																																													
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11. I hereby certify that the information supplied with this filing complies with the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature also has the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.		50.00																																																																																																													
SIGNATURE 		AS ATTORNEY/AUTHORIZED REP. 5/3/07																																																																																																													
ANDRE' K.R. CHARBONNEAU, ESQ.		941 366 8100																																																																																																													

FILED

07 MAY -7 AM 11:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT

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