

L050000 96549

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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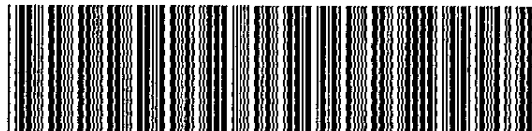
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SOS Mobile Storage, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Wendy M. Chappell
(Name of Person)

Williams Mullen
(Firm/Company)

222 Central Park Ave., Suite 1700
(Address)

Virginia Beach, VA 23462
(City/State and Zip Code)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Wendy M. Chappell at (757) 473-5436
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SOS Mobile Storage, LLC

(Present Name)
(A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on 09/27/05 and assigned
document number L05000096549.

SECOND: This amendment is submitted to amend the following:

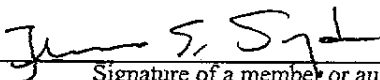
Article I of the original Articles of Organization shall be deleted in its entirety and substituted with the following to reflect the Limited Liability Company's new name.

Article 1- Name

The name of the Limited Liability Company is: ASAP Mobile Storage, LLC.

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TALLAHASSEE, FLORIDA

Dated November 10, 2005.


Signature of a member or authorized representative of a member

Thomas E. Snyder, authorized representative

Typed or printed name of signee

Filing Fee: \$25.00