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SECRETARY OF STATE OF CORPORATION OF CORPORATION

T. HAMPTON

FEB 1 9 2008

EXAMINER

COVER LETTER

_	ration Section on of Corporations	
SUBJECT:	Treasure Coast Storage II, LLC (Name of Limite	d Liability Company)
Dear Sir or M	adam:	
The enclosed	Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return	all correspondence concerning this n	natter to the following:
Michael C. \		
	(Name of Person)	•
Sea Star Re	ealty, LLC	
	artin Downs Blvd. #199	<u>, n.</u> 100 € 4
•	(Address)	,
Palm City, FL	_ 34990 (City/State and Zip Code)	·
For further in	formation concerning this matter, plo	ease call:
Michael C. V	Vhipple at ((Name of Person)	(Area Code & Daytime Telephone Number)
Registi Divisio Cliftor	ET/COURIER ADDRESS: ration Section on of Corporations a Building executive Center Circle, 11, assee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclo	sed is a check for the following am	ount:
\$25	Filing Fee	\$55 Filing Fee & Certified Copy

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.

g ,,					
1. The name of the limite	ed liability compa	any is: Treasure Coast	Storage II, LLC		·
2. The mailing address o	f the limited liabi	ility company is : 274	0 SW Martin Downs I	Blvd. #199	·
Palm City, FL 34990					
07/05/0000			06000067334		
07/05/2006 L06000067231					
3. Date of filing/registrat	ion in Florida	4.	Document number		
5. The name of the register Florida Department of		e registered office add	dress as shown on th	e records of the	;
•	Sea Star Rea	ity, LLC			
		Name			
	3275 SE Feder	ral Hwy. #199			
		Address	·	80	SEVIO
	Stuart, FL 3499		_	3	<u>≥</u> 8
		City, State and Zip	_	83	물품
6. The name and address of the new registered agent and/or office:				8	유지지
	Sea Star Realt	y, LLC		PH 12: 38	ED OF STAT ORPORAT
		Name		25:	≅STA AA
	2740 SW Martin	n Downs Blvd. #199		ဋ္ဌ	SNOLL
	Florida street a	address (P.O. Box NO	T acceptable)		35
	Palm City	FL 34990			
	•	City, State and Zip			
If the limited liability corconfirmed that after the cand the business office of liability company, it is he of the members of the lin or the operating agreeme. (Signature of Amember or author (Printed or typed name of signee I hereby accept the approximated I am familiar with ar Chapter 608, F.S. Or, if address, I hereby confirm	hange or changes the registered age reby confirmed to nited liability con nt of the limited light rived representative of	s are made, the Florid gent will be identical. hat the change(s) was mpany or as otherwise liability company.	a street address of the Or, in the case of a solution authorized by a provided in the arti	ne registered off Florida limited an affirmative icles of organiza	vote ation
(Signature of Registered Agent)					

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00