## 406000067231

(Red	questor's Name)	_
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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SECRETARY OF STATE DIVISION OF CORPORATIONS

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T. HAMPTON

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EXAMINER

## **COVER LETTER**

то:	Registration Sec Division of Corp		¥ .	<b>č</b>
SUBJE				
		·	ited Liability Company)	
The enc	losed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspor	ndence concerning this matter	to the following:	
		Michael C. Whipple		
			(Name of Person)	
		Apollo Storage		
			(Firm/Company)	
		575 N. Apollo Blvd.		
			(Address)	
		Melbourne, Florida 3293		
			(City/State and Zip Code)	•
For furtl	ner information co	oncerning this matter, please ca	all:	
Michael C. Whipple, Manager (Name of Person)			at ( 502 ) 327-3301  (Area Code & Daytime T	'elephone Number)
	·		(	
Enclose	d is a check for the	e following amount:		
<b>□</b> \$25.6	00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	☑\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$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

Treasure Coast Storage	II, LLC		
( <u>Name of the Limited</u> (A	Liability Compa Florida Limited L	ny as it now appears on our re Liability Company)	ecords.)
The Articles of Organization for this Limited L	iability Company	were filed on July 10, 2006	and assigned
Florida document number L06000067231	·		
This amendment is submitted to amend the following	owing:		
A. If amending name, enter the new name o	f the limited liab	ility company here:	
Apollo Storage, LLC			
The new name must be distinguishable and end wi "L.L.C."	th the words "Lim	ited Liability Company," the de	signation "LLC" or the abbreviation
Enter new principal offices address, if applic	able:	575 N. Apollo Blvd.	
(Principal office address MUST BE A STREE	TADDRESS)		···
		Melbourne, FL 32935	
Enter new mailing address, if applicable:		3520 Chamberlain Lane	FEB -9
(Mailing address MAY BE A POST OFFICE	BOX)		
		Louisville, KY 40241	
B. If amending the registered agent and/ registered agent and/or the new registered o Name of New Registered Agent:			ds, enter the name of the new
New Registered Office Address:	575 N. Apollo	Blvd.	
The first Interest Children / Iduless.	,		la street address)
	Melbourne		Florida <u>32935</u>
		(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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.

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

' MGR = Manager MGRM = Managing Member

Title	<u>Name</u>		Address		Type of	Action
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D. If amendi	ng any other	/ nformation, enter change(	s) here: (Attach additional sheets, if r	necessary.)	_	9
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Dated Februar	y, 10	7), 2009	Men Sa St. 17 /1/	1.1 CM.		
		Signature of a member o	rauthorized representative of a member	-01.91	F	
_	<del> </del>	Michael C. Whipple, Mgr.,	Sea Star Realty, LLC, Manage		<u> </u>	
		Typed or	r printed name of signee			

Page 2 of 2

Filing Fee: \$25.00