11000073832

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DEBARTMENT OF STAT

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SEP 2 6 2014 T. HAMPTON



ACCOUNT NO. : I2000000195

REFERENCE: 313640 82866A

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: September 25, 2014

ORDER TIME : 2:09 PM

ORDER NO. : 313640-005

CUSTOMER NO: 82866A

DOMESTIC AMENDMENT FILING

NAME: STORERIGHT (BROOKSVILLE III)

LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

TO:

Registration Section **Division of Corporations**

StoreRight (Brooksville III), LLC

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

Please return all correspondence concerning this matter to the following:

Justin P. Callaham

Name of Person

Clark, Campbell, Lancaster & Munson, P.A.

Firm/Company

500 South Florida Ave., Suite 800

Lakeland, Florida 33801

City/State and Zip Code

jcallaham@clarkcampbell-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Justin P. Callaham

at (863) Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

\$25.00 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 Tallahassce, 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

	•	OF	TALE SE
StoreRight (Brooksville III), LLC		CAH SEP
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on D6/24/2011 Florida document number L11000073832 This amendment is submitted to amend the following:			25 25 25 25 25
			AND
A. If amending name, enter the new name o	f the limited lia	bility company here:	
n/a			
The new name must be distinguishable and end with the Enter new principal offices address, if applic (Principal office address MUST BE A STREE	able:	п/а	C" or the abbreviation "L.L.C."
Enter new mailing address, if applicable:		n/a	
(Mailing address MAY BE A POST OFFICE	BOX)		
B. If amending the registered agent and/ registered agent and/or the new registered of			, enter the name of the new
Name of New Registered Agent:	n/a		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:		Enter Florida street address	
		City , F10	orida 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 605, 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = M $AMBR = A$	lanager .uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
	n/a		
			□ Remove
			□ Remove
			□ Remove
			Add
			□ Remove
			SECRETARY SECRETARY SECRETARY SECRETARY SECRETARY SECRETARY
			HARY OF STATE FLORIDA
			□ Add
			☐ Remove
			□ Add
			□ Remove

D. If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
S	ee attached.
-	
	e date, if other than the date of filing: (optional) ive date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after his document is filed by the Florida Department of State)
Dated _	MARI
	Signature of agnember or authorized representative of a member
	Matthew R. Clark, as manager of StoreRight Managment, LLC
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

SECRE ARY OF STATE SECRE AH ARS SEE FLORID

Article III shall be deleted in its entirety and the following shall be inserted in its place:

"This Limited Liability Company is organized to:

- (i) own, operate, and manage that certain storage facility known as StoreRight Self Storage located at 7294 Broad Street, Brooksville, Florida 34601; and
- (ii) engage in such other lawful activities which are appropriate, incidental, or necessary for this Limited Liability Company's ownership, operation, and management of such storage center facility."

TK SEP 25 AM IO: 06
SECRETARY OF STATE