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ACCOUNT NO. : 12000000195

REFERENCE : 313640

AUTHORIZATION

COST LIMIT :

ORDER DATE: September 25, 2014

ORDER TIME : 2:12 PM

ORDER NO. : 313640-025

CUSTOMER NO:

82866A

DOMESTIC AMENDMENT FILING

NAME: STORERIGHT (WINTER HAVEN IV)

LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT ____ RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY ___ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS:

COVER LETTER

TO: Registra

Registration Section Division of Corporations

SUBJECT. Stol

StoreRight (Winter Haven IV), 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:

Justin P. Callaham

Name of Person

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

Firm/Company

500 South Florida Ave., Suite 800

Addres

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

*",*863<u>,</u>647-5337

Name of Person

Area Code

Daytime Telephone Number

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 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

StoreRight (Winter Haver						
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears on Liability Company)	our records.)			
The Articles of Organization for this Limited I Florida document number L12000031355		were filed on 03/05	5/2012	and a	ssigned	i
This amendment is submitted to amend the fol	lowing:					
A. If amending name, enter the new name	of the limited liab	oility company here:				
n/a						
The new name must be distinguishable and end with the	words "Limited Liai	bility Company," the desig	nation "LLC" or the abt	previation	L.L.C.	12
Enter new principal offices address, if appli	cable:	n/a				
(Principal office address MUST BE A STRE.	ET ADDRESS)			For	F183	
				3.	(2)	
				影片	P 2	CHAPTER STATE
Enter new mailing address, if applicable:		n/a		<u> </u>	<u>ග</u>	્રવ — ૄ∷ ફુજ્ય
(Mailing address MAY BE A POST OFFICE	BOX)				PH	. I. I
					<u></u>	Tude:
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B. If amending the registered agent and registered agent and/or the new registered of			r records, <u>enter tl</u>	ie name	of th	e new
Name of New Registered Agent:	n/a					
New Registered Office Address:						
		Enter Florida st	reet address			
			, Florida			
		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 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, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

	<u>Name</u>	Address	Type of Action
	n/a		Add
			☐ Remove
			Add
			□ Remove
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			☐ Remove
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			□ Remove
			□ Add
			☐ Remove

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.) ee attached.
-	
(The effective	date, if other than the date of filing: (optional) we date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after is document is filed by the Florida Department of State)
Dated	Sept. 25, 2014.
	MATEL
	Signature of a member of 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

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 6400 State Road 544, Winter Haven, Florida 33881; 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."

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