115000002609

(Requestor's Name)		
(Address)	600355674076	
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	12/16/2001020014 **25.00	
(Business Entity Name)	•••	
(Document Number)		
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ORLANDO SELF STORAGE LL	C	
		ame of Limited L	iability Company
Dear S	ir or Madam:		
The er	nclosed Registered Agent/Registered O	ffice Change and	fee(s) are submitted for filing.
Please	return all correspondence concerning	this matter to the	following:
LARR	Y CHRISTOPHER TABOR		
	Name of Person		_
тне в	OUTTY LAW FIRM, P.A.		
	Firm/Company		
1150 L	OUISIANA AVENUE		
	Address	_	
WINT	ER PARK, FL 32789		
	City/State and Zip Code		
Chris@	BouttyLaw.com		
<u> </u>	-mail address: (to be used for future ar	nual report notif	ication)
For fur	ther information concerning this matte	r, please call:	
LARR	Y CHRISTOPHER TABOR	407	622-1395
	Name of Person	ar (Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, Fl. 32303
	Enclosed is a check for the followin	g amount:	
	■ \$25 Filing Fee	□ sa	55 Filing Fee & Certified Copy
INHS18	3 (2/14)		

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. 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.

1. N	ame of the limited liability company: ORLANDO S	ELF STORAG	E LLC		
2. (a)	8813 LYNDHURST PLACE	(b)	(b) 8813 LYNDHURST PLACE		
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	ORLANDO, FL 32836		ORLANDO, FL 32836		
	01/06/2015	I.	.15000002609		
3. 5. (a)	Date of filing/registration in Florida DOMINIC GARRAMBONE	4.	Document number		
(11)	Registered Agent and Registered Office shown on the record 8813 LYNDHURST PLACE	s of the Florida I	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STRE				
	ORLANDO	FL_32836			
THE BOUTTY LAW FIRM, P.A.					
(b)	Enter name of NEW Registered Agent and/or NEW Register	ered Office add	<u>ress</u> :		
	NEW Registered Office Address:				
	1150 LOUISIANA AVENUE, SUITE 5				
	WINTER PARK	. FL 32789			
chang agent was/w	limited liability company is not organized under the cor changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membericles of organization or the perating agreement of	the registered d liability con rs of the limit	I office and the business office of the registered appany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in		
	Time I tallamene	DOM	INIC GARRAMBONE Printed or typed name of signee		
I here provis the ob to mer notifie	ature of hydrember or authorized representative of a member or hydrogeneous the appointment as registered agent and cions of all statutes relative to the proper and completions of my position as registered agent as proved in the registered office addressed in writing of this change	ete performar ided for in Cl . I hereby cor	n this capacity. I further agree to comply with the		

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