## 115000128899

(Requestor's Name)			
(Address)			
(Address)			
(City/	State/Zip/Phone	e #)	
PICK-UP	WAIT	MAIL	
(Busi	ness Entity Nar	ne)	
(Document Number)			
Certified Copies	Certificates	of Status	
Special Instructions to Fi	ling Officer:		
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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: March 10, 2020

Order#: 198313/006

Re: BAKERY SQUARE SELF STORAGE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25\_\_.

Please take the following action:

XX \_\_\_ File in your office on a routine basis.

XX Issue Proof of Filing.
XX Return Regular Mail in the enclosed envelope.

Attn:Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## 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: BAKERY SQUA	RE SELF	STORAG	E, LLC
2 (a)	6410 Poplar Avenue	(b)	6410 Pd	oplar Avenue
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)		Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 650		Suite 650	
	Memphis, TN 38119		Memphis	, TN 38119
	07/29/2015		L1500012	889 <del>9</del>
3.	Date of filing/registration in Florida	4.		Document number
5. (a	Cogency Global Inc.			
J. (a	Registered Agent and Registered Office shown on the records of the	he Florida I	Dept. of State	· ::
	115 North Calhoun Street Suite 4			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
	-			~1
	Tallahassee , FL_	32301		71L 2020 HAR 12 SAGNER SIGNOFIC
(b)	Corporation Service Company			RIZ A
(-)	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	ress;	H of Styles
	1201 Hays Street			
	NEW Registered Office Address:			<b>9</b>
	Tallahassee . Ft.	22204		
	rananassee , FL_	32301		
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of a will be identical. Or, in the case of a Florida limited lia tere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the l	the regist bility cor f the limi	ered office npany, it is ted liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
	/s/ Jill Cilmi	Jill C	lmi, Author	rized Person
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to men	by accept the appointment as registered agent and agre ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	ee to act i performa I for in Ci serehy coi	in this cape nce of my c hapter 605 nfirm that i	acity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Asst. Vice President