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(Requestor's Name)								
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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#: 198313/050

Re: MIAMI CITY SELF STORAGE PEMBROKE PINES BLVD OWNER, 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.	Na	me of the limited liability company: MIAMI CITY SE	LF STOR	AGE PEMI	BROKE PINES BLVD OW	VNER,	LLC
2	(a)	2801 SW 31ST AVENUE	(b)	2801 S\	W 31ST AVENUE		
	(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		Aailing address of limited liabil (Note: MAY BE POST OFF		-
		SUITE 2-B		SUITE 2-	В		
		MIAMI, FL 33133	_ _	MIAMI, F	L 33133		
		03/23/2016		L160000 <u>5</u>	9026		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	United States Registered Agents, Inc					
٥.	(4)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	::		
		9300 S DADELAND BLVD.					
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)				
		SUITE 600					
		SUITE 600](
		MIAMI	33156			201	
						2020 MAR	; ,
	(b)	Corporation Service Company				2	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:			
						:21 HJ	•
		1201 Hays Street					* **
		NEW Registered Office Address:			•	52	
					•		
		Tallahassee , FL	32301				
th ag wa	e cha ent v as/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members colles of organization or the operating agreement of the	the registability con of the limi	ered office npany, it is ted liability	e and the business office of s hereby confirmed that the y company or as otherwis	of the re ne chan	egistered ge(s)
		/s/ Jill Cilmi	Jill C	ilmi, Autho	rized Person		
	Signa	ture of a member or authorized representative of a member			Printed or typed name of sign	ce	-
pr th to	ovisi e obl mere	by accept the appointment as registered agent and agroups on sof all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I in writing of this change.	ree to act performa d for in C hereby co	in this cape nce of my e hapter 605 nfirm that	acity. I further agree to c duties, and I am familiar i, F.S. Or, if this documen the limited liability compo	omply with an at is be any has	with the ad accept ing filed s been
	<u>ب</u>	Chara C-Kuby re of Registered Agent Corporation Service Company	DV. C	E Vi-	der Annt Vina Dunnidan	. 4.	

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: MIAMI CITY SE	LF STOR	AGE PEM	BROKE PINES BLVD	OWNER,	LLC	
2 (a)	2801 SW 31ST AVENUE (b)28			1 SW 31ST AVENUE			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(")		Mailing address of limited l		-	
	SUITE 2-B		SUITE 2-	-В			
	MIAMI, FL 33133	<u> </u>	MIAMI, F				
	03/23/2016		L1600005	59026			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a	United States Registered Agents, Inc			_			
	Registered Agent and Registered Office shown on the records of	the Florida l	Dept. of State	e:			
	9300 S DADELAND BLVD.						
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		_			
	SUITE 600				201		
				-	2020 HAR		
	MIAMI , FI.	. 33156		-	A.	•	
(b)	Corporation Service Company				12	1	
(0,	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	-	P	- •	
					:2	٠٠٠ تا	
	1201 Hays Street			_	52		
	NEW Registered Office Address:						
		-					
	Tallahassee, FI	. 32301		_			
the chagent was/v	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the still Cilmi	the regist ability con of the limi limited li	ered office npany, it is led liability ability con	e and the business offi s hereby confirmed the y company or as other npany.	ce of the re at the chan	egiste re d ge(s)	
Sign	ature of a member or authorized representative of a member	3111 0	Jill Cilmi, Authorized Person Printed or typed name of signee				
provi. the ob- to me notifi	eby accept the appointment as registered agent and agricons of all statutes relative to the proper and complete oligations of my position as registered agent as provide rely reflect a change in the registered office address, I add in writing of this change.	performa d for in C hereby co	nce of my hapter 602 nfirm that	duties, and I am famil. 5, F.S. Or, if this docu the limited liability co	iar with an ment is be mpany has	with the id accept ing filed s been	

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

EZ2 VENDOR NO.: FL DATE: 03/10/20 CHECK NC 1011881

SECRETARY OF STATE OF FLORIDA

DATE INVOICE NUMBER

AMOUNT

REFERENCE

03/10/20

1983130500001

25.00

MIAMI CITY SELF STORAGE