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(Re	questor's Name)	
(Ad	dress)	<u>.</u>
,	,	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	<u> </u>
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	;

Office Use Only



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COVER LETTER

Division of Corporation	ons		
SUBJECT: Self	Steva Name of Limi	CL & TOV	revness, it c
The anglesed Articles of Amend			
The enclosed Articles of Amend			
Please return all correspondence	concerning this matter	to the following:	
	Kiml	Name of Person	
		Firm/Company	
_	<u> </u>) Max Place Address	<u> </u>
	Boyn	City/State and Zip Code	1, FL 33436
		to be used for future annual report not	ification)
For further information concerni	ng this matter, please ca	all:	
Kimblev U Name of Person	y Mill	at (50) LOC Area Code Daytin)-8540 ne Telephone Number
Enclosed is a check for the follo	wing amount:		
	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	1	Street Address: Registration Se	ection

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

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Registration Section

TO:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Self Stora	ge @ Inver	ness, LLC
(Name of the Limited Liability) (A Florida	ty Company as it now appears on our a Limited Liability Company)	0.000000
ne Articles of Organization for this Limited Liability C	أمالنا	16) 7/30/19 and assigned
orida document number <u>LIGCOO</u>	18045	2028 2028
is amendment is submitted to amend the following:		APR 2
If amending name, enter the new name of the limi	ited liability company here:	
Involvess Situ	mae. UC	₩ 2
e new name must be distinguishable and contain the words "Limi	ited Liability Company," the designatio	n "LLC" or the abbreviation "EL.C."
nter new principal offices address, if applicable:		300
rincipal office address MUST BE A STREET ADDR	?ESS)	
		•
nter new mailing address, if applicable:		
failing address MAY BE A POST OFFICE BOX)		
		· · · · · · · · · · · · · · · · · · ·
. If amending the registered agent and/or registered	d office address on our records,	enter the name of the new regis
ent and/or the new registered office address here:	,	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	Enter Florida street	address
		F) - 1
	City	, Florida 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = M AMBR = A	lanager uthorized Member		Type of Action
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			
			□Remove
			Change
			□Add
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	<i>c</i> - ;
ective date, if other than the date of filing:	(optional)
ective date, if other than the date of filing: a effective date is listed, the date must be specific and cannot be prior to date of fil te: If the date inserted in this block does not meet the applicable statute authors's effective date on the Denartment of State's records.	ling or more than 90 days after filing.) Pursuant to 605.02
rument's effective date on the Department of State's records.	ory ming requirements, this date will not be listed
orn' specifies a delayed effective date, but not an effective time as 12.0	M
cord specifies a delayed effective date, but not an effective time, at 12:0 s filed	It a.m. on the earlier of: (b) The 90th day after the
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4 20 2020	
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Signature of a member or authorized representation of the second	

Filing Fee: \$25.00