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PICK-UP	WAIT MAIL
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Certified Copies	_ Certificates of Status
Special Instructions to	Filing Officer:
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S. WARREN OCT 2 5 2017

COVER LETTER

TO: Registration Section Division of Corporations							
Affordable Secure Storage - Ft. Myers, LLC							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Char	age and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	to the following:						
Debra Durrance	-						
Name of Person							
Affordable Secure Storage - Labelle, LLC							
Firm/Company							
5775 State Road 80							
Address							
Labelle, FL 33935							
City/State and Zip Code							
operations@supertowersinc.com							
E-mail address: (to be used for future annual repo	rt notification)						
For further information concerning this matter, please of	all:						
Erik Martin 9	78 273-7293						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:							
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy						

INHS18 (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. Na	ame of the limited liability company: Affordable \$	Secure St	orage - Ft	. Myers, LLC
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	16300 Old 41 Road		16300 O	ld 41 Road
	Naples, FL 34110		Naples, I	FL 34110
	12/07/2016		L1600022	1640
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Mark			
(/	Registered Agent and Registered Office shown on the records	of the Florida	Dept. of State	:
	Annette S. Bernal			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	1	
	16300 Old 41 Road			
	Naples ,	_{FL} 34110		F2: □
/L\				FILI 0CT 23
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office add	lress:	FIL 1 23
	Debra Durrance			AM II: 48
	NEW Registered Office Address:			
	5775 State Road 80			
	Labelle,	_{FL} 33935		
the cha agent v was/we	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regis l liability co is of the lim he limited l	tered office mpany, it is ited liability iability com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
		Tim	othy G. SI	Printed or typed name of signee
	ture of a member or authorized representative of a member			
provisi the obl to merc	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple ligations of my position as registered agent as provicely reflect a change in the registered office address, d in writing of this change.	ngree to act ele performa ded for in C I hereby ca	in this capa ince of my a hapter 605, infirm that t	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been

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

Debra Durrance

Signature of Registered Agent