

L1700004751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

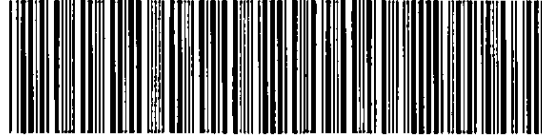
☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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17 OCT 23 PM 1:19

DIVISION OF REVENUE

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2017 OCT 23 AM 8:14

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OCT 25 2017

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Affordable Secure Storage - Hernando, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change 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 report notification)

For further information concerning this matter, please call:

Erik Martin

Name of Person

at ( 978 ) 273-7293

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

**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. Name of the limited liability company: Affordable Secure Storage - Hernando, LLC

2. (a) \_\_\_\_\_ (b) \_\_\_\_\_

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

3640 N. Carl G. Rose Hwy (Route 200)

Hernando, FL 34442

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

16300 Old 41 Road

Naples, FL 34110

03/21/2017

L17000064751

3. Date of filing/registration in Florida

4. Document number

5. (a) \_\_\_\_\_  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Annette S. Bernal

Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**

16300 Old 41 Road

Naples, FL 34110

(b) \_\_\_\_\_  
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

Debra Durrance

**NEW** Registered Office Address:

5775 State Road 80

Labelle, FL 33935

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]  
Signature of a member or authorized representative of a member

Timothy G. Sheehan

Member  
Printed or typed name of signee

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.

Debra Durrance

Signature of Registered Agent

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

FILING FEE: \$25.00