# 118000019708

		<u></u>
(Req	uestor's Name)	
(Add	ress)	<del></del>
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(City	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	





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### **COVER LETTER**

TO: Registration Section Division of Corporation		·	
SUBJECT:	Stars Self St Name of Limite	torage T Street	LLC
The enclosed Articles of An	nendment and fee(s) are subm	itted for filing.	
Please return all corresponde	ence concerning this matter to	the following:	
	Sìeg	Fried Taylor Name of Person	
	Stars Self	Storage T Stre	et LLC
	1855 Linds	ey Magnolia Cov	rt
	Navar	re FL 32566 City/State and Zip Code	<del></del>
	taylor@s	Starsselfstorage.C	OM ation)
For further information cond	erning this matter, please cal	1:	
Siegfried Name of Pr	Taylor	at ( <u>&amp;50</u> ) <u>382 - 74</u> Area Code Daytime T	175 clephone Number
Enclosed is a check for the t	ollowing amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

#### MAILING ADDRESS:

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

#### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

ge T Street LLC
ny as it now appears on our records.) iability Company)
were filed on January 22,2018 and assigned
ility company here:
ity Company," the designation "LLC" or the abbreviation "LLC."
1855 Lindsey Magnolia Court Navarre FL 32566
Navarre FL 32566
1855 Lindsey Magnolia Court Navarre FL 32566
Navarre FL 32566
Tice address on our records, enter the name of the ne
Enter Florida street address , Florida  City  Ci
City 5-Zip Code

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 = Manager

AMBR = Authorized Member Type of Action Address Title Name 1855 Lindsey Magnolia Court Add Siegfried Taylor MGR Navarre FL 32566 🔽 Change 1855 Lindsey Magnolia Court add MGR Deedrian L. Taylor Navarre FL 32566 Change ☐ Add ☐ Remove □ Change □ Add ☐ Change □ Add ☐ Remove

☐ Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
A33 20
<del></del>
Effective date, if other than the date of filing:
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of ) The 90th day after the record is filed.
Dated July 17 . 2018 .
Signature of a member of authorized representative of a member
Siegfried Taylor

Page 3 of 3

Filing Fee: \$25.00