L21000H61697

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COVER LETTER

Division of	Corporations		
Squirre SUBJECT:	el Storage LLC		
SOBJECT.	Name of Lim	ited Liability Company	
The enclosed Article	s of Amendment and fee(s) are sub	mitted for filing.	
Please return all corr	espondence concerning this matter	to the following:	
	Mark Wollschleger		
		Name of Person	
	Izzo Golf		
		Firm/Company	
	1635 Commons Parkway		
		Address	
	Macedon, NY 14502		
		City/State and Zip Code	
	mwollschleger@izzo.com		
		to be used for future annual report notificati	ion)
For further information	on concerning this matter, please c	all:	
Mark Wollschleger		315 986-0000 ext 11	6
Nai	me of Person	Area Code Daytime Tel	lephone Number
Enclosed is a check f	or the following amount:		
■ \$25.00 Filing Fe	e S30.00 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)
<u>Mailing Ad</u> Registratio	dress: on Section	<u>Street Address:</u> Registration Sectio	n

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

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

Squirrei Storage LLC			
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) ited Liability Company)		
The Articles of Organization for this Limited Liability Comp Florida document number L21000461697	pany were filed on October 21, 2021	and assigne	d
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS	<u>s)</u>		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		2022 CS	
		G	i
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	fice address on our records, <u>enter the nar</u>	ne of the new reg	istered
Name of New Registered Agent:			۱ - ——
N. D. 1. 1000 411		<u> </u>	
New Registered Office Address:	Enter Florida street address	<u></u>	
	, Florida		
	, 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 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

<u>Title</u>	Name	Address	Type of Action
MGR	Kevin Martin	1635 Commons Parkway	⊒ Add
		Macedon, NY 14502	
			□Add
			□Remove
			Change
			□Add
			□Remove
			Change
			□Remove
			□Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
			□Change
			□ Add
			□Remove
			Chango

If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after red is filed.		_
Effective date, if other than the date of filing:		
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Dated October 21 2022 Many Ab Vanns	is filed.	after the
maphyans	October 21 2022	
maphyans		
	marslans	
Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member	-