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Name:	PERSONAL	MINI STORAGE VIN	IE, LLC
Document #:			
Order #:	15238770		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			2023 NO / 29 SECRETANIA
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Thank you!

COVER LETTER

TO:	Registration Se Division of Cor						
SUBJEC		L MINI STORAGE VINE, LL	С				
30000		Name of Limited Liability Company					
		Amendment and fee(s) are sub	_				
		Cheyenne West					
		· · · · · · · · · · · · · · · · · · ·	Name of Person		_		
		NATIONAL STORAGE	AFFILIATES				
			Firm/Company			<u> </u>	
		8400 E PRENTICE AVE	FL 9		- 70 [] []	2023 NOV 2	
			Address	<u> </u>		29	, ,
		GREENWOOD VILLAG	E, CO 80111-2912		174	21	
			City/State and Zip Code		- '';		ا و _س وية
		ct-statecommunications@w	olterskluwer.com to be used for future annual report notif	(cation)	: : :	9	
For furth	ner information c	oncerning this matter, please c		cattony			
Cheyeni			720 630 - 2158at ()				
	Name o	f Person	Area Code Daytime	Telephone Numbe	r		
Enclosed	d is a check for th	ne following amount:					
□ \$25.	.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	cate of Status &		

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

Street Address:

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

PERSONAL MINI STORAGE VINE, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{03/09/2023}{1}$ and assigned 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 abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida _ City

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	SEE ATTACHED		□Add
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D. If amending any other information, enter change(s) here: (
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	(continued)
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to d. Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	(optional) ate of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) statutory filing requirements, this date will not be listed as the
the record specifies a delayed effective date, but not an effective time, nor is filed.	at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated <u>Jaccesuker</u> 28 . 2023 Signature of a member or authorize	rd representative of a member
Tiffany S	Kenyon

1 055 -12/16:2021 Wotters Kluwer Unline

Officers and Directors Details

Address for all: 8400 East Prentice Avenue, 9th Floor, Greenwood Village, CO 80111

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Arlen D. Nordhagen – Authorized Person

Tamara D. Fischer – Authorized Person

Brandon S. Togashi – Authorized Person

David G. Cramer – Authorized Person

William S. Cowen – Authorized Person

Tiffany Kenyon – Authorized Person

Derek Bergeon - Authorized Person

2023 HOV 29 PH 2: 20 SECRETATIVE TO THE