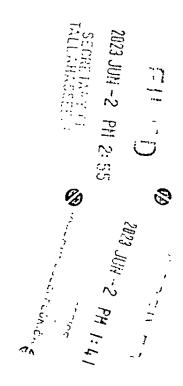
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(Requestor's Name)
	Address)
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PICK-UP	WAIT MAIL
- (Business Entity Name)
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	Document Number)
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Cedified Cooles	Certificates of Status
	. Commedies of Oldies
Special Instructions to f	Filing Officer:
	LHODNE
	J. HORNE
	JUN - 5 2023

Office Use Only



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CT CORP

(850)656-4724 3458 Lakeshore Drive, Tallahassee, FL 32312

D	ate: 06/02/2023		- a: DW
		Acc#I20160000072	- 4:()=W
Name:	PERSONAL	MINI STORAGE WIN	NTER GARDEN, LLC
Document #:			
Order #:	14966410		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🚺	Certified: Plain: COGS:		Email Address for Annual Report Notifications:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount:	\$ 55.00	

Thank you!

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.

	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 6327 Edgewater Drive	(b)	Mailing address of limited liability company:
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:
•	6327 Edgewater Drive		(Note: MAY BE POST OFFICE BOX)
•			_
3	Orlando, F1, 32810		
٦	03/09/2023	L2300	00109602
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	SMITH, MARC M		
.i. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:
	6327 EDGEWATER DRIVE		
	Registered Office Address [MUST BE FLORIDA STREET]	(ADDRESS)	
	ORLANDO, FL	32810	
(b)	C T Corporation System		2023 TALL
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>		
	NEW Registered Office Address:		— E P 17
	1200 South Pine Island Road		—
	Plantation	33324	
the char agent w was/we the artic	mited liability company is not organized under the layinge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited ligre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered ability compar of the limited b	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.
Sudadi	any 5. Kenyon me of a member or authorized representative of a member	Tittany 3,	Printed or typed name of signee
I hereh provision the oblition	ny accept the appointment as registered agent and agrous of all statutes relative to the proper and complete gations of my position as registered agent as provided in the registered office address, I is writing of this change. CT Corporation System Mana Parts Mana Parts Mana Parts	performance of d för in Chapt hereby confirn	is capacity. I further agree to comply with the

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