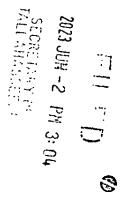
La3000 Byott

| | (Requestor's Name) |
|-------------------------|--------------------------|
| | (Address) |
| | (Address) |
| | (City/State/Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| | (Business Entity Name) |
| | |
| | (Document Number) |
| Certified Copies | Certificates of Status |
| Special Instructions to | Filing Officer |
| | J. HORNE JUN - 5 2023 |

Office Use Only



500409861225





CT CORP

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

| D | ate: | 06/02/2023 | - wild |
|---|-------------------------------|---|--|
| | | Acc#I20160000072 | 4: () = V |
| Name: | FAIRVIEW N | MINI STORAGE, 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 | Amount: S | 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.

| Na | me of the limited liability company: FAIRVIEW MIN | I STORAC | GE, LLC | |
|---------------------------------------|---|---------------------------------------|--|--|
| (a) | | (b) | | |
| , , , , , , , , , , , , , , , , , , , | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | ` ` ^ | М | ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | 6327 Edgewater Drive | | | |
| | Orlando, FL 32810 | | | |
| | 03/09/2023 | 1 | .2300010967 | 77 |
| | Date of filing/registration in Florida | 4. | 1 | Document number |
| (a) | SMITH, MARC M | | | |
| (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) | ! | ₹ |
| | | | | 2023 SEC |
| | ORLANDO FI | 32810 | | |
| | C T Corporation System | · | <u>. </u> | F!! 2023 JUH -2 SEGRETARY ALLAHASSE! |
| (b) | Enter name of NEW Registered Agent and/or NEW Registered | l Office add | Iress: | P |
| | | | | FH 3: 04 |
| | | | <u>. </u> | 914 |
| | NEW Registered Office Address: | | | |
| | 1200 South Pine Island Road | | | |
| | Plantation | 33324 | | |
| e cha ent v as/w e art | imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the | ws of the f the regis iability co | stered office impany, it is ited liability | the business office of the registers thereby confirmed that the change(s) company or as otherwise provided in spany. |
| Sibl | Lany S. Kenyon where or a member or antiportized representative of a member | | | Printed or typed name of signee |
| ovis e oh mer otifie r | by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provided in writing of this change. CT Corporation System Many Parts Maria Ozaeta, Vice are of Registered Agent. | e perjorm ed for in C hereby co | hapter 605 onfirm that | ncity. I further agree to comply with the huies, and I am familiar with and acce , F.S. Or, if this document is being file the limited liability company has been |

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