L23000109110

	(Requestor's Name)
	(Address)
	(Address)
<u> </u>	(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
	70

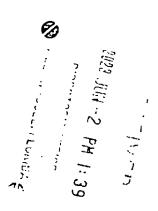




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SECRETARY FOR

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CT CORP

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

D:	o6/02/20	023 0160000073
	Acc#120	0160000072
Name:	PERSONAL MINI STO	ORAGE FOREST CITY RD., LLC
Document #:		
Order #:	14966410	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial	Country o	of Destination:
Certification:	Number o	of Certs:
Filing: 🗸	Certified: ✓ Plain: COGS:	Email Address for Annual Report Notifications
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 55.0	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.

1. 1	ame of the limited liability company:		
2. (a)		(b)	
J. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	6327 Edgewater Drive		
	Orlando, FL 32810		
	03/09/2023	1.230001	109776
3.	Date of filing/registration in Florida	4.	Document number Co
5. (a	SMITH, MARC M		
'. <u>(</u> a	Registered Agent and Registered Office shown on the records of	the Florida Dept. of	State:
	6327 EDGEWATER DRIVE		
	Registered Office Address	ADDRESS)	State: PH H. OO
	ORLANDO, FI	32810	
<i>,</i> 1. 3	C T Corporation System		
(b)	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:	
	NEW Registered Office Address:		
	1200 South Pine Island Road		
	Plantation , FI	33324	
f the	limited liability company is not organized under the la ange or changes are made, the Florida street address o	ws of the State of	ffice and the business office of the registered
igent vas/w	will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of the operating agreement of the	iability company, of the limited liab	it is hereby confirmed that the change(s) bility company or as otherwise provided in
igent vas/w he ar	will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members a ticles of organization or the operating agreement of the	iability company, of the limited liab	it is hereby confirmed that the change(s) pility company or as otherwise provided in company.
igent vas/w he ar	will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members.	iability company, of the limited liab climited liability	it is hereby confirmed that the change(s) pility company or as otherwise provided in company.
igent was/whe ar Sient I hero ob he	will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members a ticles of organization or the operating agreement of the	iability company, of the limited liab limited liability Tiffany S. Ke	it is hereby confirmed that the change(s) bility company or as otherwise provided in company. enyon Printed or typed name of signee capacity. I further agree to comply with the

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