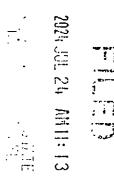
L23000149542

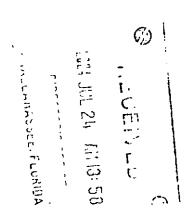
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

Office Use Only



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CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext:

Date: 07/23/24 Order #: 1572948-2 Re: LSF II FT. Knox, LLC Processing Method: In-House

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$30.00 - FL State Account Number: I20000000195

and a man

AUTH

Please take the following action:

File on a routine basis Issue proof of filing Return evidence to the following: ATTN: Amanda Miller c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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.

(a)	(b)				
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 824 HIGHLAND AVENUE ORLANDO, FL 32803			
824 HIGHLAND AVENUE					
ORLANDO, FL 32803					
03/31/2023		L23000149542			
Date of filing/registration in Florida	4.	Docu	ment number		
(a)					
(a) Registered Agent and Registered Office shown on the records	s of the Florida I	Dept. of State:			
LIBERTY STORAGE FUND II, LLLP					
Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)				
824 HIGHLAND AVENUE					
ORLANDO	. FL 32803		•	21	
·			· · · · · · · · · · · · · · · · · · ·	2021; JUL 24	دادر رو در
(b)		_	-	<u> </u>	i serve
Enter name of NEW Registered Agent and/or NEW Registe	rea Onice and	ress:		45	1
Corporation Service Company			•		
NEW Registered Office Address:			. '. 	=	1.28
1201 Hays Street			7 T	Ē	
Tallahassee	FL_32301				
ne limited liability company is not organized under the nge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited s/were authorized by an affirmative vote of the member	laws of the S the registered I liability con rs of the limit	l office and the b pany, it is hereb ed liability com	ousiness office by confirmed	e of the that the	e registered e change(s
articles of organization or the operating agreement of t	the limited lia	bility company.			

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.

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President on behalf of Corporation Service Company