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August 15, 2001

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L98-2989
MUN

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Wellington Storage, L.L.C.
Resignation of Registered Agent

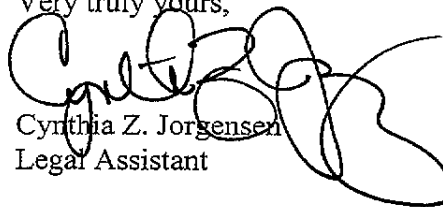
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Dear Sir/Madam:

Enclosed for filing is an original and one exact copy of a Resignation of Registered Agent form for Wellington Storage, L.L.C., together with a check in the amount of \$25.00 to cover the filing fee. Please return the acknowledgment of filing to me in the enclosed self-addressed stamped envelope.

If you have any questions regarding the foregoing, please call me at (414) 277-5191.

Very truly yours,


Cynthia Z. Jorgensen
Legal Assistant

CZJ:see
Enclosures
MKE#5104525.1
0105.3013.4.0

cc: Ms. Nancy B. Colman (w/encl.)
Mr. Fredrick G. Lautz (w/o encl.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Florida-Lawdock, Inc.

(Name of Registered Agent)

, hereby resigns as

Registered Agent for Wellington Storage, L.L.C.

(Name of Limited Liability Company)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



(Signature of resigning agent)

If signing on behalf of an entity:

Cynthia Z. Jorgensen

(Typed or printed name)

Assistant Secretary

(Capacity)

FILING FEES:

\$ 85.00 Active Limited Liability Company
\$ 25.00 Dissolved Limited Liability Company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS17(10/99)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA