L99000004304

(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:				



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: January 29, 2020

Order#: 148235/029

Re: PUBLIC STORAGE NORTH MIAMI, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25___.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

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

INCA.XCOA

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. N	ame of the limited liability company: PUBLIC STORA	AGE NORT	H MIAMI, LLC	
2. (a)	701 Western Avenue	(b)_		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Nate: MAY BE POST OFFICE BOX)	
	Glendale, CA 91201			
	07/15/1999	<u>L</u>	_9900004304	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a	C T Corporation System			
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	1200 South Pine Island Road			
	Registered Office Address (MUST BE FLORIDA STREET)			
	<u></u>		<u>-</u>	
	Plantation	22224	2020 JAN	
(b)	Plantation F1.			
	Corporation Service Company			
	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	<u>ss</u> : 3 ,	
			· P	
	1201 Hays Street			
	NEW Registered Office Address:		72	
				
	Tallahassee, FI	32301		
the clagent was/v	limited liability company is not organized under the landange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registe ability com of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in	
/s/	Jill Cilmi	Jill Cili	mi, Authorized Person	
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee	
provi the o to me	eby accept the appointment as registered agent and agg sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	e performan ed for in Che	ce of my duties, and I am familiar with and accep anter 605. F.S. Or. if this document is being filed	
Signa	ture of Registered Agent Corporation Service Company	BY: Am	i M. Casper, Asst. Vice President	