

Division of Corporations Public Access System

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REGISTERED AGENT CHANGE SAFEGUARD STORAGE PROPERTIES LLC

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SECRETARY OF STATE OF STATE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

| Pursuant in the provision llability company submit agent, or both, in the State | ns of suctions 608.4 s the following states se of Florida. | 16 or 608.5 ment in orde | 08. Florida Statutes, the u er to change its registered t | ndørsigned limited office or regissered |
|--|---|--|--|---|
| 1. The name of the limits | ed liability company i | s: Safeguard | Storage Proporties LLC | |
| 2. The mailing address of | f the limited liability | company is | · | |
| 3350 Peachuree R4 NE, Ste. 17 | 00, Atlanta, CA 30326 | | | |
| 1/25/01 | • | | M01000000198 | |
| 3. Date of filing/registrat | ion in Florida | | 4. Document number | |
| 5. The name of the registe Florida Department of | | gistered offic | se address as shown on the r | |
| | Corporation Service Cor | | · · · · · · · · · · · · · · · · · · · | 8 |
| | (50) U Bernin | Name | | 08 MAR |
| | 201 Hays Street | Address | · · · · · · · · · · · · · · · · · · · | . မိ |
| | Tailahassoc, PL 32301-2 | | | . ယ |
| | Çir | y, State and | Zip | 7 |
| 6. The name and address | of the new registered | agent and/o | r office: | Ä |
| | crc | Corporation Sy | etem | 2 |
| | 1200 \$2 | Name ath Pine Island | Dond | |
| | | | x NOT acceptable) | |
| | _ Plantation | FL . | 33324 | |
| | City, | State and 2 | ip | ₩ |
| confirmed that after the cand the business office of liability company, it is he of the members of the lin or the operating between | hange or changes are the registered agent reby confirmed that t nited liability compar at of the limited liabil | made, the F will be identified the change(s my or as other lity company | laws of the State of Florida, lorida street address of the r lical. Or, in the case of a Fla) was/were authorized by an twise provided in the article | registered office orida limited a affirmative vote |
| (Signature of a member of author | ized representative of a men | nber) | - | |
| Mark B. Rinder, Manager | | | | |
| (Printed or typed number of signer) | | | | |
| in the state of th | polation System | agent and a live to the proof of my poor piled to me lily compan | gree to get in this capacity. Sper and complete performe sillon as registered agent a rely reflect a change in the y has been notified in writin | I further agree to ince of my duties, s provided for in registered office g of this change. |
| (Signature of Registered Agent) | 2 58 | ECIAL ASSI | 原等於稱名。如此後發展在多數學 | |
| Divisio | on of Corporations, l | P.O. Box 63 NG FEE: 8 | 27, Takahassee, FL 32314 | ļ |

INHS18 (8/05)