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To:

Division of Corporations

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From:

Kathleen M. Walkling

Account Name

: CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 Phone

: (407) 650-1000

Fax Number

: (407)650-1065

FOREIGN LIMITED LIABILITY COMPANY

WESTCHESTER PORTABLE STORAGE, LLC

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J. BRYAN JUN

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608-503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
WESTCHESTER PORTABLE STORAGE, LLC
(Name of foreign limited liability company)
2. DELAWARE 3. 20-0803222 4/27 C. 14
1. WESTCHESTER PORTABLE STORAGE, LLC (Name of foreign limited liability company) 2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized) 4. 2/25/2004 (Date of Organization) 5. PERPETUAL (Duration: Year limited liability company will cease to exist or "perpetual")
4. 2/25/2004 5. PERPETUAL
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6. UPON QUALIFICATION
(Date first transacted business in Florida. (See sections 608.50), 608.502, and 817.155, F.S.)
7. 450 S. ORANGE AVENUE, ORLANDO, FL 32801-3336
,
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
JMS GROWTH EQUITIES, INC.
450 S. ORANGE AVENUE, ORLANDO, FL 32801-3336
10. Attached is an original certificate of existence, no more than 90 days old, duly atthenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: RENTAL OF
PORTABLE STORAGE UNITS
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
LINDA A. SCARCELLI
Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 of 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

WESTCHESTER PORTABLE STORAGE, LLC

2. The name and the Florida street address of the registered agent and office are:

LINDA A. SCARÇELLI

(Name)

450 S. ORANGE AVENUE, ORLANDO

Florida street address (P.O. Box NOT ACCEPTABLE)

FL 32801-3336 (City/Spite/Zio)

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my fluties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "WESTCHESTER PORTABLE STORAGE, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN good standing and has a legal existence so far as the records of THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF JUNE, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.





Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3156246

DATE: 06-07-04

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