2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 10, 2006 8:00 am Secretary of State 03-24-2006 90220 041 ****50.00

DOCUI 1. Entity Nam YASKY L)4147			03-24-20	00 90220 041	. 50.
Principal Place of Business 6745 ENGLE ROAD, SUITE 300 CLEVELAND, OH 44130		Mailing Address 6745 ENGLE ROAD, SUITE 300 CLEVELAND, OH 44130			2004737 		
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1	CR2E083 (11/05)	
City & State		City & State	City & State		4. FEI Number 55-0900641		oplied For
Zip	Cauntry	Zip	Cour	itry .		55.00 Add	ditional
	6. Name and Address of Curre	nt Registered Agent	egistered Agent Name		7. Name and Address of New Regi	stered Agent	
1200 SQU	ORATION SYSTEM TH PINE ISLAND ROAD ION, FL 33324	·	Street Address		(P.O. Box Number is Not Acceptable)	·	
				City		F1 Zip Coo	•
8. The above	named entity submits this statement	for the purpose of changing it	s register	ed office or registe	red agent, or both, in the State of Florida		
signature	ions of registered agent.						
	Signature, typed or printed name of registered age	ni and tile if applicable. (NO	TE: Registers	d Agent signature require		DATE	
FI D	lling Fee is \$50.00 ue by May 1, 2006				Florida De	heck payable to epartment of State	
9. TITLE	MANAGING MEMI	BERS/MANAGERS	10.		ADDITIONS/CH	ANGES	
NAME	Li Deels		III. Kwa			Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	6745 ENGLE ROAD, SUITE 30 CLEVELAND, OH 44130	ю	STREE CITY-				
TITLE			řm,	E		☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	şı			E ET ADDRESS - ST-ZIP			
TITLE			tmu			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP	REET ADDRESS			E Et adoress - St-Zip			•
TOLE		☐ Deleto	mu			☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				E Et adoress - St-Zip			
INLE		☐ Defete	m			Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP				E et adoress -st-zip			
TILE		☐ Deleta	titt			☐ Change	Addition
NAME STREET ACCRESS CITY-ST-ZIP			4	E Et adoress -st-zip			
	certify that the information supplied with on this report is true and accurate as billity company or the receiver or trust				in Chapter 119, Florida Statutes. I furthe nade under oath; that I am a managing ter 608, Florida Statutes.	r certify that the info member or manage	mation r of the
}	1.1	1/1/1//	7				-
SIGNATURE: 3/14/0((440) 334-0700 BIGINATURE AND TYPED OR PRINTED NAME OF SIGNATURE MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daylors Prove 6							



J-STORE-IT

We're the Self-Storage Professionals

6745 Eng
Clevelan

6745 Engle Road · Suite 300 Cleveland, OH 44130

April 3, 2006

VIA CERTIFIED MAIL

Division of Corporations P.O. Box 6478 Tallahassee, Florida 32314

RE:

YSI VI LLC - M0500003870

YSI Management LLC - M04000004539

YASKY LLC - M05000004147

To Whom It May Concern:

Pursuant to your letters regarding the above-referenced entities, attached are copies of the corrected annual reports containing the FEI Numbers. Also attached are copies of the documents from the IRS containing same.

Please forward any evidence of acceptance of this filing to the attention of the undersigned.

If you have any questions, please call me.

Sincerely,

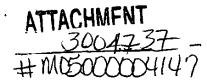
Amy M. Duchnowski

Administrative Coordinator

Unign Dichask

Enclosure





6745 Engle Road - Suite 300 Cleveland, OH 44130

March 17, 2006

VIA CERTIFIED MAIL

Division of Corporations P.O. Box 6478 Tallahassee, Florida 32314

RE:

Document #M05000004147

YASKY LLC

To Whom It May Concern:

Enclosed for processing is the 2006 Limited Liability Company Annual Report for the above referenced entity together with a check in the amount of \$50.00 to cover the fee

Please forward any evidence of acceptance of this filing to the attention of the undersigned.

If you have any questions, please call me.

Sincerely,

any m. Dicharder

Amy M. Duchnowski Administrative Coordinator

Enclosure



IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
P.O. BOX 9003
HOLISVILLE NY 11742-9003

Date of this notice: 07-25-2005

Employer Identification Number:

55-0900641

Form: SS-4

Number of this notice: CP 575 F

YASKY LLC % U-STORE IT L P SOLE MBR 6745 ENGLE RD MIDDLEBURG HEIGHTS OH 44130

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an EIN. We assigned you EIN 55-0900641. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, please use the label IRS provided. If that isn't possible you should use your EIN and complete name and address shown above on all federal tax forms, payments and related correspondence. If this information isn't correct, please correct it using the tear off stub from this notice. Return it to us so we can correct your account. If you use any variation of your name or EIN, doing so could cause a delay in processing and may result in incorrect information in your account. Doing so could result in our assigning you more than one EIN.

If you want to apply to receive a ruling or a determination letter recognizing your organization as tax exempt, and have not already done so, you should file Form 1023/1024, Application for Recognition of Exemption, with the IRS Ohio Key District Office. Publication 557, Tax Exempt Status for Your Organization, is available at most IRS offices and has details on how you can apply.

IMPORTANT REMINDERS:

- * Keep a copy of this notice in your permanent records.
- st Use this EIN and your name exactly as they appear on all your federal tax forms.
- * Refer to this EIN on your tax related correspondence and documents.

Thank you for your cooperation.



001385