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ACCOUNT NO. : 072100000032

REFERENCE: 188775 7275202

AUTHORIZATION

ORDER DATE: June 19, 2006

ORDER TIME : 9:10 AM

ORDER NO. : 188775-050

CUSTOMER NO: 7275202

CHANGE OF AGENT

NAME:

HILLSBOROUGH AVENUE SELF

STORAGE, LLC

, PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Denise Mick

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. The name of the limite	d liability company i	s: HILLSBORG	OUGH AVENUE SE	LF STORAGE, LL	<u>c</u> .	
2. The mailing address of	the limited liability	company is : _			<u></u> .	
10770 Columbia Pike, Suite 1	00, Silver Spring, MD 20	901				
12/12/2005			M05000006918		-	
3. Date of filing/registration in Florida			4. Document number			
5. The name of the register Florida Department of S	ered agent and the reg	gistered office a	address as shown	on the records o	f the	
·		Matt Lundstrom				
		Name		•		
100 Rialto Place, Suite 758						
Address				SEC		
Melbourne, FL 32901 City, State and Zip			2006 JUN 21 SECRETAR TALLAHASS			
	City	y, State and Zij	2	TAS AS		
6. The name and address of the new registered agent and/or office: Corporation Service Company Name 1201 Hays Street						
Corporation Service Company						
Name SE ö						
		01 Hays Street			יכ	
	Florida street addre	ess (P.O. Box N	(O1 acceptable)			
	Tallahassee	FL	32301			
	City,	State and Zip				
If the limited liability come confirmed that after the chand the business office of liability company, it is her of the members of the limited or the operating agreement agreement (Signature of a member or authority)	nange or changes are the registered agent reby confirmed that that hited liability compan at of the limited liabil	made, the Flor will be identicated the change(s) was otherwity company.	ida street address al. Or, in the case as/were authorize	s of the registered c of a Florida lim ed by an affirmat	d office ited tive vote	
0 1 11 11	D 11 /070					
Sandra Houen, Vice (Printed or typed name of signee)						
I hereby accept the appoint comply with the provision and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm	ntment as registered s of all statules relati d accept the obligation his document is being that the limited liabi	agent and agre ive to the prope ons of my positi g filed to merel lity company h	ee to act in this co er and complete p ion as registered y reflect a change as been notified i	apacity. I further performance of m agent as provide e in the registere in writing of this	r agree to w duties, ed for in ed office change.	
_ (peanely	acqueline M. Giles, Asst.	es				

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00