# M130005015

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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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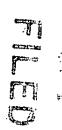
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DEPARTMENT OF STATE

2013 AUG -9 AM IO: 59
SECRETARY OF STATE
FALLBAHMSSEE FLORIDA



AUG 1 2 2013

D. ERUCE



ACCOUNT	NO		120000000195	
WCCCON1	TAO +	•	エとしししししししエンフ	

REFERENCE : 757681 - 7603235

AUTHORIZATION:

COST LIMIT : \$ 125.00

ORDER DATE: August 8, 2013

ORDER TIME : 5:17 PM

ORDER NO. : 757681-005

CUSTOMER NO: 7603235

#### FOREIGN FILINGS

NAME: DEVON-GAINESVILLE LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight -- EXT# 52956

EXAMINER:

CR2E027 (9/10)

#### **COVER LETTER**

	gistration Section rision of Corporations					
SUBJECT:	Devon-Gainesville LLC					
SUBJECT.		Name of Lin	nited Liability Company	······································		
The enclosed Existence, ar	d "Application by Foreign Limited and check are submitted to register to	Liability Com he above refe	npany for Authorization to Tr renced foreign limited liabilit	ansact Business in Flo y company to transact	rida," Certificate of business in Florida.	
Please return	all correspondence concerning thi	s matter to the	e following:			
	Valerie Mora					
		N	ame of Person		<del></del>	
	Atalaya Capital Manageme	nt LP				
	<del>,</del>	Fi	rm/Company	.,	<del></del>	
	780 Third Avenue, 27th Flo	or			298	<b>-</b>
			Address		AL S	
	New York, NY 10017				AUG -9	STATE OF THE PARTY
		City/S	tate and Zip Code		m '	
	mora@atalayacap.com			Mary and the second	ANIO: 5	i.
		-	I for future annual report noti	fication)	59 59	
	nformation concerning this matter, p	piease caii:				
Val	lerie Mora  Name of Person	Are	212 201-19 at () a Code & Daytime Telephone			
Divi Reg P.O.	ILING ADDRESS: ision of Corporations istration Section . Box 6327 ahassee, FL 32314	STREI Divisio Registr Clifton 2661 E	ET ADDRESS: on of Corporations ation Section Building xecutive Center Circle assee, FL 32301			
	s a check for the following an 125.00 Filing Fee \$\square\$		☐ \$155.00 Filing Fee & Certified Copy	□ \$160.00 Filing Fo of Status & Certi		

## 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:

1. Devon-Gainesville LLC	1	of the defendance of the second of the secon	_
(Name of Foreign Limited Liability Company; must inc	inac	e "Limited Liability Company," L.L.C., or "LLC."	
(If name unavailable, enter alternate name adopted for the purp consent of the managers or managing members adopting the alt Company," "L.L.C," "LLC.")	oosc tern	of transacting business in Florida and attach a copy of the ate name. The alternate name must include "Limited Liabi	written lity
2. Delaware	3.	46-3373187	
(Jurisdiction under the law of which foreign limited liability company is organized)		(FEI number, if applicable)	_
4. August 8, 2013	5.	Perpetual	
(Date of Organization)		(Duration: Year limited liability company will cease to exist or "perpetual")	_
6. August 8, 2013			
(Date first transacted business in F (See sections 608.501 & 608.502 F.	lor S. t	ida, if prior to registration.) o determine penalty liability)	
7. 780 Third Avenue, 27th Floor			
New York, NY 10017		Ain	2012
(Street Addres	SS O	f Principal Office)	AUG
3. If limited liability company is a manager-manage	d c	ompany, check here	6-9j
9. The name and usual business addresses of the ma	nag	ging members or managers are as follows: "!!	*
ACM Fund V-1 Inc., 780 Third Avenue, 27th Floor, N	lew	York, NY 10017	_ <u>:</u>
			59
			<b>-</b>
10. Attached is an original certificate of existence, no more than 9 the jurisdiction under the law of which it is organized. (A photocranslation of the certificate under eath of the translator must be su	хору	is not acceptable. If the certificate is in a foreign language, a	
11. Nature of business or purposes to be conducted (		management of salf storage	
facilities	Or p	Johnsted III 1 1011dd.	<del>-</del>
(In accordance with section 608.408(3), F.S., the ex	Cut	norized representative of a member.	<b>-</b> -
document to the Department of State constitute	es a	I am aware that any false information submitted in a third degree felony as provided for in s.817.155, F.S.)	
		Cinn	
Typed or printe	ed r	name of signee	

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 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.

If unavailable, the alternate to be used in the state of Florida is:  2. The name and the Florida street address of the registered age  Corporation Service Company  (Name)	ent and office are:
Corporation Service Company	ent and office are:
(Name)	
	and the second s
1201 Hays Street	
Florida Street Address (P.O. Box NOT Ad	CCEPTABLE)
Tallahassee 3230	1
City/State/Zip	process for the above stated timited 5
Having been named as registered agent and to accept service of pliability company at the place designated in this certificate, I here registered agent and agree to act in this capacity. I further agree statutes relating to the proper and complete performance of my accept the obligations of my position as registered agent as proving the complete.	eby accept the appointment as 2 be to comply with the provision of all huties, and I am familiar with and 2 ided for in Chapter 608, Florida 5
Corporation Service Company  Harry	Herry B. Deve
By: (Signature)	

\$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

## Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "DEVON-GAINESVILLE 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 EIGHTH DAY OF AUGUST, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID

"DEVON-GAINESVILLE LLC" WAS FORMED ON THE EIGHTH DAY OF AUGUST,

A.D. 2013.

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

2018 AUG - 9 AM IO: 59

5380391 8300

130970998

AUTHENTY CATION: 0651679

DATE: 08-08-13

You may verify this certificate online at corp.delaware.gov/authver.shtml