M14000002221

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BLUE DOORS STORAGE I GP. LLC

TYPE OF FILING: CHANGE OF AGENT

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AUTHORIZATION: ABBIE/PAUL HODGE

abbiettock

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

Pursuant to the provisions of sections 605.0114, 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. Na	ame of the limited liability company: BLUE DOOR	S STORAGE I GP, LLC		
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	725 Park Center Drive		-
	(TOTAL MOST BE BANDER TERRITOR	Matthews, NC 28105		
(b)	Mailing address of limited liability company:	725 Park Center Drive		
	(Note: MAY BE POST OFFICE BOX)	Matthews, NC 28105	<u></u>	<u> </u>
April	2, 2014	M14000002221	(N)	7.5.7 7.5.6.4
3. Date of filing/registration in Florida		4. Document number		() T
5. (a) Registered Agent and Registered Office shown on	he records of the Florida Dept.	f∑ of State:	Older. HV15
	Registered Agent:	C T Corporation System) (A)
	Registered Office Address:	1200 South Pine Island Road		
		Plantation, FL 33324		
	NEW Registered Agent:	National Corporate Research, Ltd., Inc. 155 Office Plaza Drive		
	NEW Registered Agent:	•	Ltd., inc.	
NEW Registered Office Address: 155 (MUST BE FLORIDA STREET ADDRESS)		155 Office Plaza Drive		
		Taliahassee	FL 32301	
configure and the interest that the op-	limited liability company is not organized under the remed that after the change or changes are made, the Fine business office of the registered agent will be identify company, it is hereby confirmed that the change(s) tembers of the limited liability company or as otherwiperating agreement of the limited liability company.	orida street address of the registion.	tered office	ote of
Signate	ire of smember or authorized representative of a member			
Printe	DAVID BENSON d or typed name of signee	_		
I her comp and I Chap address	reby accept the appointment as registered agent and a ly with the provisions of all statutes relative to the property am familiar with and accept the obligations of my poster 605, F.S. Or, if this document is being filed to me ess, I have by confirm that the limited liability compan	gree to act in this capacity. I fu oper and complete performance sition as registered agent as pro- rely reflect a change in the regi whas been notified in writing of	orther agr of my du ovided for stered off this chan	ee to ties, in ice ge.
Signat	ure of Registered Agent Sean Honan, Assistant Secreta	cy		

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