Division of Corporations

Page 1 of 1



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCAG00000023 Phone : (850)222-1092 Fax Number : (850)878-5368 File Le Le Le before Registration

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

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DIVISION OF CORPORATIONS
INFORMATION SERVICEAL

## Foreign Limited Liability Company LIFESTORAGE MANAGEMENT, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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SEP 10 2014

COVER LETTER	
TO: Registration Section Division of Corporations	
SUBJECT: LifeStorage Management, LLC	
Name of Limited Liability Company	-
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Existence, and check are submitted to register the above referenced foreign limited liability company to transact business.	" Certificate of ness in Florida
Please return all correspondence concerning this matter to the following:	
Sally Action	
Name of Person	
LifeStorage Management, LLC	
Firm/Company	
3470 Mt. Diablo Blvd., Suite A310	
Address	
Lafayette, CA 94549	至 2
City/State and Zip Code	A SE
E-mail address: (to be used for future annual report notification)	
	% \$ <b>0</b>
For further information concerning this matter, please call:	
Salty Action at (415 ) 982-0195	ကြေးကြေးကြောင့်
Name of Contact Person Area Code Daytime Telephone Number	3. 3. 3.
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Clifton Building Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building Tallahassee, FL 32301	\$\$\dots + \dots
Enclosed is a check for the following amount:  S125.00 Filing Fee Certificate of Status  S155.00 Filing Fee Certified Copy  S160.00 Filing Fee, Confidence of Status  Certified Copy  S160.00 Filing Fee, Confidence of Status	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

If name unavailable, enter alternate name adopted for the number of transacting business in Florida. The alternate name a	must include "I	Limited
iability Company," "L.L.C," or "LLC."}		
2 Delawarc 3, 27-3641537		
(Jurisdiction under the law of which foreign limited liability (FEI number, il applicable) company is organized)		
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)		
1380 Lead Hill Blvd., Snite 200		_
Roseville, CA 95661		
(Street Address of Principal Office)	, II; 7:	201
1380 Lead Hill Blvd., Suite 200	CG-2	c>
Roseville, CA 95661	(A)	4
(Mailing Aditress)	<u> </u>	-9
. The name, title or capacity and address of the person(s) who has/have authority to manage	ge is/ere?	) ]
fark Good, Member - 3470 Mt. Diablo Blvd., Suite A310, Lafayette, CA 94549	S	<u> </u>
isin dose, menser - 3770 inn pissio bira, buite Apro, Lalayene, CA 21372	1. 1574	_ <del>"</del>
Lobert Wallace, Member - 3470 Mt. Diablo Blvd., Suite A310, Lufayette, CA 94549	17日	<del>_</del> _
toven Fink, Member - 3470 Mt. Diabio Bivd., Suite A310, Lafnyotte, CA 94549		
Attached is an original certificate of existence, no more than 90 days old, duly authenticate ving custody of records in the jurisdiction under the law of which it is organized. (A photo		
eceptable. If the certificate is in a foreign language, a translation of the certificate under oat ust be submitted)		
Mark		
Signature of an authorized person accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjuty that the average that any false information submitted in a document to the Department of State constitutes a third degree foliasy as provided for		
Mark Good, Member		
Typed or printed name of signee		

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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:			
LifeStorage Management, LLC				
If unavailable, the alternate to	o be used in the state of Florida is:			
2. The name and the Florida	street address of the registered agent and office are:			
CT Corporation	on System		20	
	(Name)		2014 SEP	THE STREET
1200 South Pin	ne Island Road		2	**************************************
<del></del>	Florida Street Address (P.O. Box NOT ACCEPTABLE)	357 77 =	ė	
Plantation	FL 33324 City/State/Zip	場所の表示	АМ 9:	
		17/7/	34	#441

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

By: Danijela Bycos, Ast Screetney

\$ 100.00
\$ 25.00
\$ 30.00
\$ 5.00
Certified Copy (optional)
\$ 60.00
Certificate of Status (optional)

# Delaware

PAGE :

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LIFESTORAGE MANAGEMENT, 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 TWENTY-FIRST DAY OF AUGUST, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4834441 B300

141095022

You may verify this cortificate eqline

AUTHENTICATION: 1637859

DATE: 08-21-14