Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000193924 3)))



H150001939243ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

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

Email Address:

Foreign Limited Liability Company Stor-All 8th Street, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

AUG 1 2 2015

S MASON

8/11/2015

COVER LETTER

UD TECT.	Stor-All 8th Street,	LLC					
UBJECT	Name of Limited Liability Company						
he anclosed xistence, ar	d "Application by Pond check are sübmitt	reign Limited Liability Com ed to register the above refer	pany for Authoriza enced foreign limit	tion to Tri ed liabilit	ansact Business in Plorids," Certifice y company to transact business in Pl		
lease return	ali correspondence	concerning this matter to the	following:				
	Dawn M. Osol	ımann					
		N	ame of Person				
	c/o Public Stor	rage					
		F	irm/Company	·			
	701 Western A	AGUITE					
			Address		······································		
	Glendale, CA	91201					
		City/S	itate and Zip Code		<u> </u>		
	JBattle@publics	_					
		E-mail address: (to be use	d for future annual	report no	tification)		
or further is	nformation concernit	ng this matter, please call:					
Dawn M. Oschamnn		818 at (244-80	980			
	Name	of Contact Person	Area Code	Day	ytime Telephone Number		
MAILING ADDRESS: Division of Corporations		STREET ADDRESS: Division of Corporations					
	Registration Section P.O. Box 6327		Registration Section Clifton Building				
•	. Box 032/ lahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301				
Enclosed is a	check for the follow 125.00 Filing Pee	ving amount: ☐ \$130.00 Filing Fee &	🗆 \$155.00 Pilin		☐ \$160,00 Filing Fcc, Certificate		

8/11/2015 1:21:13 PM From: To: 8506176383(3/4)

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 COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Stor-All 8th Street, LL	c				
(Name of For	algo Limited Liability Company; mu	st include "Limited Lab	Ility Company," "L.L.C.	," or "LLC.")	
(If name unavailable, enter a	ternate name adopted for the purpos	e of transacting husiness	in Florida. The alternati	name must lock	ude #1 Imited
Liability Company," "L.L.C.	"or"LLC.")	a a himinatoria describado		n nemne vredi filet	ovo minico
2. Delaware		3,			
company is organized)	of which foreign limited liability		(PBI number, if applic	able)	
4. N/A					
	(Date first transacted busine (See sections 605,0904 & 605	ss in Plorida, if prior to a .0905. F.S. to determine	egisfration.) penalty liability)		
701 Western Avenue			,		
Charles CA Man					
Glendale, CA 91201	(Street Address of)	Principal Office	,	- <u></u>	<u>.</u>
Same as above	(ancet Vonces at)	rmepai Onice)			
6.			<u> </u>	- 2 2	<u> </u>
				HASS	
	(Mulling)	Address)			
7. Name and street address	s of Plorida registered agent: (P.	.O. Box <u>NOT</u> acceptal	ble)	T = 1	> [:::]
Name:	C T Corporation System			r s	ِ 😈 ۾
Office Address:	1200 South Pine Island Road			بسومد	<u>ن</u>
	Plantation		, Florida 33324	<i>,</i> 35≈	
	(City)		, Florida(Zip code)	
this application, I hereby	gistered agent and to accept serv accept the appointment as regist itatutes relative to the proper and iton as registered agent.	ered agent and agree	to act in this capacity ce of my duties, and . Nicola	. I further agr	ee to comply
	(Registe	ered agent's signature)			
8. The name, title or caps	city and address of the person(s)	who has/have authorit	v to manage (s/are:		
•	laware corporation - Managing I	· ·			
701 Western Avenue, Ole	ndale, CA 91201				
9. Attached is a certificate jurisdiction under the law of the translator must be su		enticate in a foreign	ted by the official hav innguings, a translatio	ing custody of n of the certific	records in the rate under eath
	Signature.	of an authorized person			
This document is executed submitted in a document to	in accordance with section 605.0 the Generiment of State constituting PS Florida One, Inc., a Delawar	les a third degree felon e corporation, Manugi	y as provided for in s. ng Member	any false infor 817.155, F.S.	mation
	By: Lily Y. Hughes, Senior Vice	President, Chief Lugal	Officer		
	anim securious 130cg of bi	rinted name of signee			

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STOR-ALL STR STREET, 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 SEVENTEENTH DAY OF JULY, A.D. 2015.

151055474

DATE: 07-17-15