# M16000001321

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Casaint least unions to Filing Office					
Special Instructions to Filing Officer.					

Office Use Only



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10/17/23--01016--001 \*+620.00

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### **COVER LETTER**

TO:	_		Section Corporations			
SUBJ	ECT:	SIMPI.	Y STORAGE SANFORD, L	.LC		
			Name of Fore	ign Limited Lia	ability Co	mpany
Dear S	Sir or N	/ladam:				
The en	nclosed	l applic	ation, certificate and fee(	s) are submitted	d for filing	2
Pleaso	returr	all cor	respondence concerning t	this matter to th	ie followii	ng:
Steve	Babinsk	i				
			Name of Person			
Public	Storage	2				
			Firm/Company		<del></del>	
701 W	estern /	Avenue				
			Address		_ <b>_</b>	
Glenda	ale, CA	91201				
			City/State and Zip Co	de		
sbabin	ski@pu	blicstora	ige.com			
E-n	nail ad	dress: (	o be used for future annu	al report notific	cation)	
For fu	irther ii	nformat	ion concerning this matte	er, please call:		
Steve	Babinsk	i		at (	649 - 1	3358
	•	Nan	ne of Person	Area Coo	de & Dayt	time Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303			
			a check for the followin	-		
<b>≡</b> \$25	Filing	Fee	☐ \$30 Filing Fee & Certificate of Status	□ \$55 Filin Certified	_	☐ \$60 Filing Fee.  Certificate of Status &  Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

#### SECTION 1 (1-4 must be completed)

1. Name of limited liability Company as it appear	rs on the records of the Florida De	epartment of		
State: SIMPLY STORAGE SANFORD, LLC				
Enter new principal office address, if applicable:	701 Western Avenue			
(Principal office address	Glendale, CA 91201	2023 OCT 17		
<u>MUST BE A STREET ADDRESS)</u>				
Enter new mailing address, if applicable:	701 Western Avenue	<u> </u>		
( <u>Mailing address</u> <u>MAY BE A POST OFFICE BOX</u> )	Glendale, CA 91201	PH 3: D7		
		7 DA		
2. The Florida document number of this limited lia	ability company is: M16000001	321		
3. Jurisdiction of its organization: Delaware				
4. Date authorized to do business in Florida:	16/2016			
SECTION II (5-9 complete only the applicable				
5. New name of the limited liability company: (must	st contain "Limited Liability Com	pany, ""L.L.C.," or "LLC.")		
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or ma must contain "Limited Liability Company," "L.L.	naging members adopting the alt	usiness in Florida and attach a emate name. The alternate name		
6. If amending the registered agent and/or register registered agent and/or the new registered office a		enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:	Enter Florida	Comment III		
	Enter Florida			
<del></del>	City	, Florida Zip Code		
New Registered Agent's Signature, if changing Reliable I hereby accept the appointment as registered age the provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this capaci and complete performance of my tered agent as provided for in Ch in the registered office address.	duties, and I am familiar with apter 605, F.S. Or, if this		

If the amendment cl	nanges person, title or capacity	y in accordance with 605.0902 (1)(c), ind	icate that change:
itle/ Capacity	<u>Name</u>	Address	Type of Action
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		<del></del>	□Remov
			□Add
			□Remov
			□Add
			□Remo
<del></del> -			\ \_Add
			□Remo
			□Add
Attached is a certif aforementioned am jurisdiction under t	endment(s), duly authenticate he law of which this entity is o	on 90 days old, evidencing the ed by the official having custody of recording and the official having custody of recording the of the authorized representative	TALLE AHASSEE F

Filing Fee: \$25.00

## 8. If the amendment changes person, title or capacity in accordance with 605,0902 (1)(e), indicate that change:

Title/Capacity	Name	Address	Type of Action
Мападег	BSREP II Simply Storage JV LLC	4901 Vineland Road,	Remove
		Suite 350	1
		Orlando, FL 32811	1
Manager	Kurt E. O'Brien	4901 Vineland Road,	Remove
J		Suite 350	
		Orlando, FL 32811	
Authorized Signatory	Kyle Schmutzler	4901 Vineland Road,	Remove
		Suite 350	
		Orlando, FL 32811	

Title/Capacity	Name	Address	Type of Action
Мападег	SS Mezzanine, LLC	701 Western Avenue, Glendale, CA 91201	Add
President	Nicholas Kangas	701 Western Avenue, Glendale, CA 91201	Add
Vice President and Treasurer	Terrance Spidell	701 Western Avenue, Glendale, CA 91201	Add
Vice President and Secretary	Nathaniel A Vitan	701 Western Avenue, Glendale, CA 91201	Add
Vice President and Assistant Treasurer	Drew Adams	701 Western Avenue, Glendale, CA 91201	Add
Vice President and Assistant Secretary	Steven C. Babinski	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Sharon Linder	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Dan Fabricant	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Andres Friedman	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Michael McGowan	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Robbie Williams	701 Western Avenue, Glendale, CA 91201	Add
Vice President	Albert Shaw	701 Western Avenue, Glendale, CA 91201	Add

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