M16000013aa

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
, ,					
(Document Number)					
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500416565265





CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I	2000000195
REFERENCE : 0	13618 8293887
AUTHORIZATION :	. 0
COST LIMIT	25900 man
ORDER DATE: September 22, 2023	
ORDER TIME : 9:33 AM	
ORDER NO. : 013618-096	
CUSTOMER NO: 8293887	
CHANGE OF AGENT	
NAME: SIMPLY STORAGE ORM LLC	OND BEACH,
PLEASE RETURN THE FOLLOWING AS PROO	F OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Eyliena Baker	
EXAMINE	R'S INTTIALS.

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. N	Name of the limited liability company: SIMPLY STOR	AGE OF	RM	RMOND BEACH, LLC
2. (a)	4901 Vineland Road Suite 350		(b)	4901 Vineland Road Suite 350
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Orlando, FL 32811			Orlando, FL 32811
	02/16/2016			M16000001322
3.	Date of filing/registration in Florida	4.	_	Document number
5. (a)			
-	Registered Agent and Registered Office shown on the records of COGENCY GLOBAL INC.	the Flori	da I	la Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE.	SS)	<u>si</u> ?:
	115 N CALHOUN ST, STE 4			3 OC
	TALLAHASSEE	32301		23 OCT -5 M D. L
	, FI			
(b)				59 50
	Enter name of NEW Registered Agent and/or NEW Registered	l Office :	ıdd	ddress:
	Corporation Service Company			<i>∞</i> o n
	NEW Registered Office Address:			
	1201 Hays Street			
	Tallahassee . FI	32301		· .
chang agent was/w	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	ws of the registe ability cof the li limited	red com mit Hia	red office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company.
C	/S/ Jill Cilmi	Jil —	I Ci	Cilmi, Authorized Person
	ature of a member or authorized representative of a member			Printed or typed name of signee
1 nere provis the ob to med notifia	eby accept the appointment as registered agent and agisions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address. I see in writing of this change.	ree to ac perform d for in hereby c	et i nar Cl con	t in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and acce Chapter 605, F.S. Or, if this document is being file onfirm that the limited liability company has been
	Drace C-Kuble	(Gra	Grace E. Kirby, Asst. Vice President
Signat	ure of Registered Agent		•	······································

1 - W