## M16 000009202

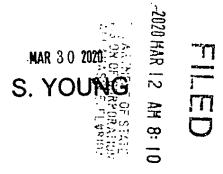
(Requestor's Name)					
(Address)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: March 10, 2020

Order#: 198313-064

Re: PLG JACKSONVILLE STORAGE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of 25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company 251 Little Falls Drive

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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.	Na	me of the limited liability company: PLG JACKSONV	/ILLE ST	ORAGE, LLC
2. (	a)	1368 TURNER CHURCH RD	_ (b)	
		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		ENIGMA, GA 31749	-	ENIGMA, GA 31749
		11/14/2016		M16000009202
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	SLOMKA, HOWARD P, ESQ		
		Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State:
		C/O OLYMPIA DEVELOPMENT GROUP INC.		
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	
		100 MAIN STREET, STE 200		-1
		SAFETY HARBOR , FL_	34695	2020 HAR 12 1 VISION OF U
(	(b)	Corporation Service Company		AR 12 ANIA SSEE
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office add	ress:
		1201 Hays Street		Take 🙃
		NEW Registered Office Address:		·····································
				<del></del>
		Tallahassee, FL_	32301	
the age was	cha nt w /we	mited liability company is not organized under the law nge or changes are made, the Florida street address of a fill be identical. Or, in the case of a Florida limited liab tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regis bility co f the limi	tered office and the business office of the registered inpany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
		/s/ Jill Cilmi	Jill C	ilmi, Authorized Person
Si	gnat	ure of a member or authorized representative of a member		Printed or typed name of signee
pro the to n	visi obli tere fiec	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I h I in writing of this change.	re to act performa I for in C sereby co	in this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accep, hapter 605, F.S. Or, if this document is being filed nfirm that the limited liability company has been
<del></del>		Irace Cokubly		
Sign	natui	re of Registered Agent Corporation Service Company	BY: G	ace E. Kirby, Asst. Vice President