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



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SECRETAIN OF STATE DIVISION OF CORPORATIONS

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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: Tecora Bell tecora.bell@cscglobal.com

Date: January 31, 2018

Order#: 997327-192

Re: PRIME STORAGE RICHARD ROAD ROCKLEDGE, LLC

Enclosed please find:

XX___ Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Tecora Bell

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.

OUCA.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: PRIME STORAGE | SE RICH | ARD ROA | D ROCKLEDGE, LLC |
|--------------------|-------------------------------|---|--|---|--|
| 2. | (a) | 85 RAILROAD PLACE | (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) |
| | | | _ | | |
| | | SARATOGA SPRINGS NY 12866 | _ | | |
| | | 11/17/2016 | _ | M160000 | 09262 |
| 3. | | Date of filing/registration in Florida | 4. | | Document number |
| 5. | (a) | INCORPORATING SERVICES, LTD. | | | |
| | | Registered Agent and Registered Office shown on the records of the Florida Dept. of State: | | | |
| | | 1540 GLENWAY DR. | | | |
| | | Registered Office Address (MUST BE FLORIDA STREET AL | ODRESS) | | • |
| | | | | | , cm |
| | | TALLAHASSEE , FL_ | 32301 | | SECRE NVISION 18 FEB |
| | (b) | Corporation Service Company | | | -2 -2 |
| | ` ' . | Enter name of NEW Registered Agent and/or NEW Registered C | office add | ress: | (-) -, (T) |
| | | | | | PH 3: 517 |
| | | 1201 Hays Street | | | 3: 517 |
| | | NEW Registered Office Address: | | | |
| | | | | | |
| | | Tallahassee, FL_ | 32301 | | |
| the age wa: | char ent w s/wer | nited liability company is not organized under the laws age or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of thes of organization or the operating agreement of the li | he regist vility cor the limi | ered office npany, it is ed liability | and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in |
| | | Xel E. Whee | Jill C | lmi, Author | ized Person |
| | | ere of a member or authorized representative of a member | | · · · · · | Printed or typed name of signee |
| the to r not | obli obli nere ified | y accept the appointment as registered agent and agree ins of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change. | e to act i erforma for in Ci reby coi | n this capa nce of my a napter 605, nfirm that t | icity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been |
| Sig | natur | of Registered Agent Corporation Service Company | BY: Gra | ace E. Kirl | by, Asst. Vice President |