14/10000002577

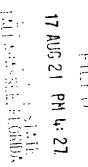
| (Re | equestor's Name) | |
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| (Ad | dress) | <u>-</u> |
| (Ad | dress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nam | ne) |
| (Do | ocument Number) | _ |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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S. WARREN AUG 2 1 2017

COVER LETTER

Division of Corporations SUBJECT: JSF Trade Center Drive CMPII, LLC Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Tina Reynolds Name of Person Johnson Smith Hibbard and Wildman Firm/Company 220 N Church St., Suite 4 Address Spartanburg, SC 29306 City/State and Zip Code Isimmons@johnsondevelopment.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: $_{at}$ 864 $_{)}$ 582-8121 Tina Reynolds Name of Person rea Code & Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☐ \$55 Filing Fee & **\$25** Filing Fee \$30 Filing Fee & \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

CR2E055 (9/15)

TO:

Registration Section

Certified Copy

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

SECTION I (1-4 must be completed)

| | ig Registered Agent: | Σφ C | |
|--|--|---|---------------|
| | City | , Florida Zip Co | ode . |
| Enter Florida Street Address | | | |
| New Registered Office Address: | | | 27 |
| Name of New Registered Agent: | | | : <u>t:</u> 2 |
| 6. If amending the registered agent and/or regi registered agent and/or the new registered offi | istered officer address on our reco ice address here: | ords, enter the name of th | 21 wPH |
| (If name unavailable, enter alternate name add copy of the written consent of the managers of must contain "Limited Liability Company," "I | r managing members adopting the | g business in Florida and alternate name. The alternate | ernate name |
| New name of the limited liability company (| r: | Company, ""L.L.C.," or | "LLC.") |
| SECTION II (5-9 complete only the applica | 2, , | | |
| 4. Date authorized to do business in Florida: | 3/24/2017 | | |
| 3. Jurisdiction of its organization: South C | | | |
| 2. The Florida document number of this limite | | 0002577 | |
| MAY BE A POST OFFICE BOX) | | | |
| Enter new mailing address, if applicable: (Mailing address | | ······ | |
| (<u>Principal office address</u>) <u>MUST BE A STREET ADDRESS</u>) | | | |
| Enter new principal office address, if applicab | ole: | | |
| | | | |

document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

| | | sferred; manager appointed | |
|-----------------------------|--|---|-----------------------------------|
| Title/ Capacity | <u>Name</u> | <u>Address</u> | Type of Action |
| Member ——— | National Safe Harbor Exchanges | 100 Dunbar Street, Suite 400 | |
| | | Spartanburg, SC 29306 | Remove |
| Member | The Haven at Central Mount Pleasant II Storage Fund, LLC | 100 Dunbar Street, Suite | 400 Add |
| | | Spartanburg, SC 29306 | Remove |
| Manager JSF Management, LLC | JSF Management, LLC | 100 Dunbar Street, Suite | 400 ■Add |
| | | Spartanburg, SC 29306 | Remove |
| | | | Add |
| | | | Remove |
| | | | Add |
| | | | Remove |
| aforemention | inder the law of which this entity is org | y the official having custody of records in | FILED 17 AUG 21 PM 18 AUG 21 PM |

Filing Fee: \$25.00