M17000003952

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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#: 997327-230

Re: PRIME STORAGE STUART SOUTH, 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.

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.	. Name of the limited liability company: PRIME STORAGE STUART SOUTH, 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			
		05/09/2017	M170000	003952	
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 th	e Florida Dept. of Stat	te:	
		1540 GLENWAY DRIVE			
	_				
		TALLAHASSEE ,FL_	32301	SECRE DIVISION 18 FE	
	(b)	Corporation Service Company			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Office address:	2 616	
				PH 3: Of PH 3: Of	
		1201 Hays Street		9. 2. 3. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	
		NEW Registered Office Address:		 95	
				_	
		Tallahassee . FL_	32301	_	
the age was	chai nt w s/we:	mited 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 cles of organization or the operating agreement of the limited liab	he registered offici fility company, it i the limited liabilit	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in	
	ianati	are of a megaber of authorized representative of a member	Jill Cilmi, Autho		
l h pro the to n not	ereb visid obli nere ified	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete page ations of my position as registered agent as provided if y reflect a change in the registered office address, I he in writing of this change.	erformance of my for in Chapter 603 reby confirm that	Printed or typed name of signee bacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been rby, Asst. Vice President	