M18000010972

(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:

Office Use Only



000417507530

10/17/23--01016--001 **620.00



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to amend the name, jurisdiction, or the registered agent, or any person identified in accordance with s. 605.0902 (1)(e), or a change in title or capacity of that person, for a foreign limited liability company authorized to transact business in Florida. The requirements are as follows:

- > Pursuant to s. 605,0907, Florida Statutes, the attached application must be completed in its entirety.
- A certificate from the state of jurisdiction evidencing the amendment must be submitted with the application. The certificate should be issued within the past 90 days.
- The name of a limited liability company in the state of Florida must contain the words "Limited Liability Company," the abbreviation "L.L.C." or the designation "LLC."
- The name of a limited liability company must be distinguishable on the records of the Florida Department of State. If you have changed the name of your limited liability company and the new name is not distinguishable on our records, you must adopt an alternate name to use in the state of Florida. To adopt an alternate name, you must submit a copy of the written consent of the managers or managing members adopting the alternate name. You may download a fill-in-the blank consent form from our website www.sunbiz.org.

A preliminary search for name availability can be made on the Internet through the Division's records at www.sunbiz.org. Preliminary name searches and name reservations are no longer available from the Division of Corporations. You are responsible for any name infringement that may result from your name selection.

The fees are as follows:

S25.00 Filing Fee S30.00 Certified Copy (optional) S 5.00 Certificate of Status (optional)

- A letter of acknowledgment will be issued free of charge upon registration. Please submit one check made payable to the Florida Department of State for the total amount of the filing fee and any optional certificate or copy.
- A COVER letter should be submitted along with the application, certificate, and check. The mailing address and courier address are noted below.
- Please send the application to:

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051.

CR2E055 (9/15)

COVER LETTER

	_	on Section of Corporations			
SUBJEC	CT: SS C	GIBSONTON, LLC			
		Name of Foreig	gn Limited Lia	bility Co	mpany
Dear Sir	or Mada	m:			
The encl	losed app	lication, certificate and fee(s)) are submitted	for filing	3.
Please re	eturn all o	correspondence concerning th	is matter to the	e followi	ng:
Steve Bal	binski				
		Name of Person			
Public St	torage				
		Firm/Company			
701 West	tern Aveni	ne		_	
		Address			
Glendale	c, CA 9120	1			
		City/State and Zip Cod	le	_	
		lorage.com			
E-mai	il address	: (to be used for future annua	I report notific	ation)	
For furth	her inform	nation concerning this matter	, please call:		
Steve Ba	binski		_ at (3358
	N	ame of Person	Area Cod	le & Dayı	time Telephone Number
1	Mailing A	ddress:		Street A	<u></u>
	_	ion Section		_	ration Section
		of Corporations			on of Corporations
P.O. Box 6327			The Centre of Tallahassee		
ŕ	Tallahass	see, FL 32314			Monroe Street, Suite 810 Assee, FL 32303
į	Enclosed	is a check for the following	amount:		
	iling Fee	_	□ \$55 Filing	g Fee &	□ \$60 Filing Fee,
	J	Certificate of Status	Certified	_	Certificate of Status & Certified Copy
CR2E055	(9/15)				

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)

1. Name of limited liability Company as it appears	s on the records of the Florida Dep	partment of
State: SS GIBSONTON, LLC		
Enter new principal office address, if applicable:	701 Western Avenue	<u> </u>
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	Glendale, CA 91201	2023 OC
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	701 Western Avenue Glendale, CA 91201	ET 17 PH 4: 31
2. The Florida document number of this limited lia	bility company is: M180000109	72
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 12/0	05/2018	<u>.</u>
SECTION II (5-9 complete only the applicable		
New name of the limited liability company:	t contain "Limited Liability Comp	iness in Florida and attach a
must contain "Limited Liability Company," "L.L.C	c." or "LLC.")	nate name. The atternate name
6. If amending the registered agent and/or registered registered agent and/or the new registered office agent and/or registered agent a		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida S	treet Address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agenthe provisions of all statutes relative to the proper and accept the obligations of my position as regist document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this capacity and complete performance of my e ered agent as provided for in Chap in the registered office address, 1)	duties, and I am familiar with oter 605, F.S. Or, if this

e/ Capacity	<u>Name</u>	Address	Type	of Action
				□Add
				□Remo
				□Add
				□Remo
			_	□Add
				□Remo
				□Add
		<u></u>		□Remo
				□Add
Attachad is a carti	ficate, if required: no more than 90 c	days old, evidencing the		□Remo

Filing Fee: \$25.00

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

Title/Capacity	Name	Address	Type of Action
CEO	Kurt O'Brien	4901 Vineland Road.	Remove
		Suite 350	
		Orlando, FL 32811	
Authorized Signatory	Kyle Schmutzler	4901 Vineland Road,	Remove
and EVP		Suite 350	
		Orlando, FL 32811	

Title/Capacity	Name	Address	Type of Action	
Manager	Simply Storage REIT 2 LLC	701 Western Avenue,	Add	
		Glendale, CA 91201		
President	Nicholas Kangas	701 Western Avenue,	Add	
	_	Glendale, CA 91201		
Vice President and	Terrance Spidell	701 Western Avenue,	Add	
Treasurer		Glendale, CA 91201	4	
Vice President and	Nathaniel A. Vitan	701 Western Avenue,	Add	
Secretary		Glendale, CA 91201		
Vice President and	Drew Adams	701 Western Avenue,	Add	
Assistant Treasurer		Glendale, CA 91201		
Vice President and	Steven C. Babinski	701 Western Avenue,	Add	
Assistant Secretary		Glendale, CA 91201		
Vice President	Sharon Linder	701 Western Avenue,	Add	
		Glendale, CA 91201		
Vice President	Dan Fabricant	701 Western Avenue,	Add	
		Glendale, CA 91201		
Vice President	Andres Friedman	701 Western Avenue,	Add	
		Glendale, CA 91201		
Vice President	Michael McGowan	701 Western Avenue,	Add	
		Glendale, CA 91201	<u></u>	
Vice President	Robbie Williams	701 Western Avenue,	Add	
		Glendale, CA 91201		
Vice President	Albert Shaw	701 Western Avenue,	Add	
		Glendalc, CA 91201		

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