

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
PSL MERCANTILE PROPERTY OWNER LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

MAR 25 2021

M. SOLOMON

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Corporate Filing Menu

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

FILED

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 on the records of the Florida Department of

State: PSL MERCANTILE PROPERTY OWNER LLC

Enter new principal office address, if applicable: 105 SIESTA WAY

(Principal office address

MUST BE A STREET ADDRESS)

PALM BEACH GARDENS, FL 33418

Enter new mailing address, if applicable:

(Mailing address

MAY BE A POST OFFICE BOX)

105 SIESTA WAY

PALM BEACH GARDENS, FL 33418

2. The Florida document number of this limited liability company is: M21000001477

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 02/05/2021

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: _____
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C.," or "LLC.")

6. If amending the registered agent and/or registered officer address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: ERIC LEVITT

New Registered Office Address: 105 SIESTA WAY

Enter Florida Street Address

PALM BEACH GARDENS

Florida 33418

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this 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.

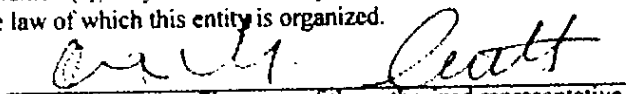
Eric Levitt
If Changing Registered Agent, Signature of New Registered Agent

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

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

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AP	AMBROSI, ROBERT J	1401 BROAD STREET	<input type="checkbox"/> Add
		CLIFTON, NJ 07013	<input checked="" type="checkbox"/> Remove
AP	STEUTERMAN, JAMES M	1401 BROAD STREET	<input type="checkbox"/> Add
		CLIFTON, NJ 07013	<input checked="" type="checkbox"/> Remove
AP	AMBROSI, MICHAEL	1401 BROAD STREET	<input type="checkbox"/> Add
		CLIFTON, NJ 07013	<input checked="" type="checkbox"/> Remove
AP	BAUMANN, GARY S	1401 BROAD STREET	<input type="checkbox"/> Add
		CLIFTON, NJ 07013	<input checked="" type="checkbox"/> Remove
Member	RL STORAGE, LLC	105 SIESTA WAY	<input checked="" type="checkbox"/> Add
		PALM BEACH GARDENS, FL 33418	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


Signature of the authorized representative

Eric Levitt

Typed or printed name of signer

Filing Fee: \$25.00

2021 MAR 24 AM 9:37
CLERK OF STATE
JENNIFER L. GORDON

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PSL MERCANTILE PROPERTY OWNER LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF MARCH, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PSL MERCANTILE PROPERTY OWNER LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF JANUARY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



4844230 8300

SR# 20210956437

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 202764798

Date: 03-18-21