

M 210000 13110

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

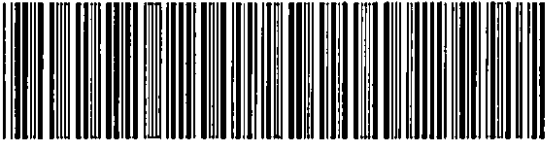
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600375980466

RECEIVED
2021 NOV -2 AM 8:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2021 NOV -2 PM 1:29

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312

850-656-4724

Date: 11/02/2021

Acc#I20160000072

Eric DWH

Name:	EXTRA SPACE OF SAND LAKE VISTA LLC
Document #:	
Order #:	13962116 - 52

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input checked="" type="checkbox"/>
	Plain: <input type="checkbox"/>
	COGS: <input type="checkbox"/>

Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **55.00**

Thank you!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EXTRA SPACE OF SAND LAKE VISTA 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:

SUZIE LINDSEY
Name of Person

EXTRA SPACE STORAGE
Firm/Company

2795 E. COTTONWOOD PKWY, SUITE 400
Address

SALT LAKE CITY UT 84121
City/State and Zip Code

SLINDSEY@EXTRASPACE.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SUZIE LINDSEY at (801) 562-5556
Name of Person Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, 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 on the records of the Florida Department of State: EXTRA SPACE OF SAND LAKE VISTA LLC

Enter new principal office address, if applicable: _____

(Principal office address
MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable: _____
(Mailing address
MAY BE A POST OFFICE BOX)

2. The Florida document number of this limited liability company is: M21000013110

3. Jurisdiction of its organization: DELAWARE

4. Date authorized to do business in Florida: 10/05/2021

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

5. New name of the limited liability company: PR II EXR SAND LAKE VISTA LLC
(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: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, Florida _____
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.

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)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Remove
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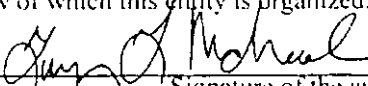
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9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.


 Signature of the authorized representative

GWYN G. MCNEAL

 Typed or printed name of signee

Filing Fee: \$25.00

SECRET
 2021 MAR 2
 8:28 AM
 -2
 Add.

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "EXTRA SPACE OF SAND LAKE VISTA LLC", CHANGING ITS NAME FROM "EXTRA SPACE OF SAND LAKE VISTA LLC" TO "PR II EXR SAND LAKE VISTA LLC", FILED IN THIS OFFICE ON THE FIRST DAY OF NOVEMBER, A.D. 2021, AT 7:31 O CLOCK P.M.




Jeffrey W. Bullock, Secretary of State

6276399 8100
SR# 20213672822

Authentication: 204576401
Date: 11-02-21

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

**STATE OF DELAWARE
CERTIFICATE OF AMENDMENT**

1. Name of Limited Liability Company:
EXTRA SPACE OF SAND LAKE VISTA LLC

2. The Certificate of Formation of the limited liability company is hereby amended as follows:

FIRST: The name of the Limited Liability Company is "PR II EXR SAND LAKE VISTA LLC"

IN WITNESS WHEREOF, the undersigned have executed this Certificate on the 1st day of November, A.D. 2021.

By:
Authorized Person(s)

Name: Kirk Grimshaw
Print or Type