

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000034025

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: MIMS U.S. 1 MINI STORAGE, INC.

## Current Principal Place of Business:

3755 U.S. HIGHWAY 1  
MIMS, FL 32754

## New Principal Place of Business:

## Current Mailing Address:

3755 U.S. HIGHWAY 1  
MIMS, FL 32754

## New Mailing Address:

FEI Number: 20-2459331

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WASILESKI, CARL  
507 PALM AVENUE  
TITUSVILLE, FL 32796 US

## Name and Address of New Registered Agent:

RAMAGE, CYNTHIA  
1830 TOMATO FARM RD  
MIMS, FL 32754 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CYNTHIA RAMAGE

04/24/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: RAMAGE, DAVID  
Address: 1830 TOMATO FARM ROAD  
City-St-Zip: MIMS, FL 32754

Title: VP ( ) Delete  
Name: RAMAGE, CYNTHIA  
Address: 1830 TOMATO FARM ROAD  
City-St-Zip: MIMS, FL 32754

Title: T ( ) Delete  
Name: RAMAGE, CYNTHIA  
Address: 1830 TOMATO FARM ROAD  
City-St-Zip: MIMS, FL 32754

Title: S ( ) Delete  
Name: RAMAGE, CYNTHIA  
Address: 1830 TOMATO FARM ROAD  
City-St-Zip: MIMS, FL 32754

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CYNTHIA RAMAGE

VP

04/24/2008

Electronic Signature of Signing Officer or Director

Date