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ECRETARY OF STATE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Pinedo Self Storage, Inc.,
2. The principal office address: (190 N. US Hwy) Melbourne, Fl. 32940
3. The mailing address (if different):
4. Date of incorporation/qualification: 03 22 2005 Document number: P0500043309
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned) Patrick F. Heay RESIGNED
Gray Pobinson P.A. P.O.Box 1870 1795 West Nasa Blvd. Melbaume, Fl. 37901
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Mark Stabler ~ =
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Melbaine Pl 32940 \$ 5 7
The street address of its registered office and the street address of the business office of its Restreet agent as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Mark D. Stabler Signature of an officer of director Mark D. Stabler Printed or typed name and title
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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Mark Dark Date Stahler
If signing on behalf of an entity:
Typed or Printed Name

* * * FILING FEE: \$35.00 * * *