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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer;				
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15 AUG 17 PM 3: 50
SECRETARY OF STATE
FALLAHASSEE FEIGRIN

T. Burch AUG 2.4.2015

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	NEXT	Secf	STUR	AGE	NC.	
	(PROP	OSED CORPO	DRATE NAM	ME – <u>MUST IN</u>	<u>CLUDE SUF</u>	<u>FIX</u>)
Enclosed are an orig	ginal and one (l) copy of the	e articles of	incorporation	and a check	for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certifica	te of Status	Fil &	\$78.75 ing Fee Certified Copy	Cert & C & C State	ng Fee, ified Copy ertificate of us
			AI	DDITIONAL	COPY RE	QUIRED
FROM: POBERT NETKIN Name (Printed or typed) 1101 NW 23 ST. UNIT A						
Address MIAMI FLA. 33127 City, State & Zip						
305-965-5110 Daytime Telephone number						
	robne E-mail a	+ @	nex-	ture annual rep	ort notificati	(am on)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corpora	tion shall be: NEXT	SELF STORAG	BE INC.	
ARTICLE II PRINC		Mailing address, if different is:		
1101 NM.	23 ST. MIAMI	Fla. 33127		
ARTICLE III PURPO The purpose for which t	DSE he corporation is organized is:	<u> </u>		
				15 AUG 17 P
				H 3 50 FLORIDA
	ES stock is: 100 AL OFFICERS AND/OR DIRECTED E: POBER NETKIN	1 -	e: MEUSSA	NETRIN V.P.
Address	1266 NE 94 S. MIAMI, Pla		-	= 945+ Fla. 33138
Name and Title Address	PICHAPO NET 1110 VENETIA MIMMI BOACH, 33139	N WAY Address:	····	
Name and Title	:			

Name and Title:	Name and Title:				
Address	Address:				
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of	the registered agent is:				
Name: ROBER NETHN					
Address: 1266 NE 94 St.	TALE 35.				
Mispur, Pla. 33138					
ARTICLE VII INCORPORATOR	SSE OF THE PROPERTY OF THE PRO				
The name and address of the Incorporator is:					
Name: ROBERT NETKN	3: 50 STATE LORIDA				
Address: 1266 NE 94 St					
MIAMI, Ma. 33138	3				
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: 93 20 5 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)					
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity					
Required Signature/Registered Agent	ETKN 8/13/15 Date				
I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.					
	ETKIN 8/13/15				