

P93 000072560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

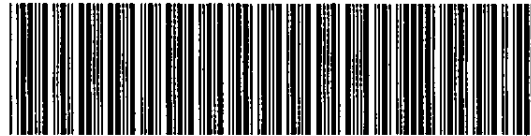
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

*EPON*

DEC 18 2012

C. MUSTAIN



WIAND GUERRA KING P.L.L.C. | 5505 W. GRAY STREET | TAMPA, FL 33609 | PHONE: 813.347.5100

Jeffrey C. Rizzo  
Direct Dial: 813-347-5123  
jrizzo@wiandlaw.com

December 12, 2012

**VIA U.S. MAIL**

Florida Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

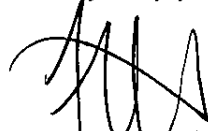
**Re: Change of Registered Office or Registered Agent or Both for Corporations**  
• **KMA Storage, Inc.**

Dear Sir or Madam:

Enclosed please find the original Change of Registered Office or Registered Agent or Both for Corporations for KMS Storage, Inc. along with our firm's check in the amount of \$35.00.

Thank you for your assistance in this matter.

Very truly yours,

  
Jeffrey C. Rizzo

/jcr  
Enclosures

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KMA Storage, Inc.

Name of Corporation

**DOCUMENT NUMBER:** P93000072560

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

James L. Spencer

Name of Contact Person

KMA Storage, Inc.

Firm/Company

1401 S. Ft. Harrison Ave.

Address

Clearwater, FL 33756

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James L. Spencer

Name of Contact Person

at ( 727 ) 647-2948

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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: KMA Storage, Inc.
2. The principal office address: 1401 S. Ft. Harrison Ave., Clearwater, FL 33756
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 10/14/1993 Document number: P93000072560
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)

Burton W. Wiand

Wiand Guerra King P.L.

3000 Bayport Drive, Suite 600, Tampa, FL 33607

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Burton W. Wiand

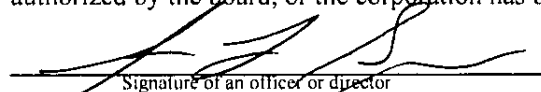
Wiand Guerra King P.L.

P.O. Box NOT acceptable

5505 Gray Street, Tampa, FL 33609

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

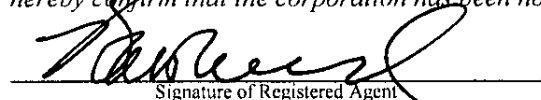
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

James L. Spencer, PD

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.*

  
Signature of Registered Agent

12/12/2012  
Date

If signing on behalf of an entity:

Burton W. Wiand

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)

FILED  
12 DEC 14 PM 12:22  
TALLAHASSEE, FLORIDA