17000109213

Requestor's Name Hillyate et
Address 32368 Tallahassee, FL City/State/Zip

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1 500	spine state s	tologe	i	TIVE DATE
	(Corporation Name)	(Do	cument #)	
2	(Corporation Name)	(Do	cument #)	97 DE
3	(Corporation Name)	(Do	cument #)	9 3 3 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
4	(Corporation Name)	(Do	ocument #)	E STATE STATE
Walk in Mail out	☐ Pick up time☐ Will wait	Photocopy	Certified C	opy of Status

	NEW FILINGS	AMENDMENTS
1	Profit	Amendment
	NonProfit	Resignation of R.A., O
	Limited Liability	Change of Registered
	Domestication	Dissolution/Withdraw
ļ	Other	Merger

AMENDMENTS		
Amendment		
Resignation of R.A., Officer/Director		
Change of Registered Agent		
Dissolution/Withdrawal		
Merger		

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

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Examiner's Initials

ARTTICLES OF INCORPORATION

I. Name

The name of the corporation shall be Sunshine State Storage, ZAC.

II. Address

The official address of the corporation is

Sunshine State Storage, 1nc. 657 West Brevard St. Tallahassee, Fl 32304

EFFECTIVE DATE

III. Registered Agent

The Registered Agent shall be

Patrick Williams Erik Milman 2317 Tupelo 445 Conradi St. #21 Tallahassee, Fl 32304

IV. Shares

There will be shares issued to each of the officers of the corporation (2)

V. Officers

The officers shall be as follows:

President: Patrick Williams

Vice President: Frank W Williams

Ettective pate UI

Incorporator

The name and address of the incorporator is Frank W. Williams 1704 Millgate Court

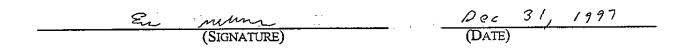
Tallahassee, FL 32308

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1.	The name of the corporation is:	Junshine	state	storage	, Inc.	<u>.</u>	
2.	The name and address of the register	ered agent and off	ice is:				•
	Erik Mi	(NAME)			ALL	97 DEC 31	
	445 Can Y	or Mail Drop Box N	# 21 OT ACCEPTABL	E)		PH	
	Tallah a 55e	CITY/STATE/ZI	23 . 4 P)		EURIDA	4:37	

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314