P99000046303

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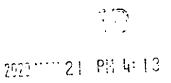
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: AAA AMERICAN	STORAGE, INC.			
DOCUMENT NUMBER: P99000046303					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	BONNIE L. GEARHART				
		Name of Contact Persor	1		
	AAA AMERICAN STORAGE, INC				
	Firm/ Company				
	199 VILLA CITY ROAD				
	Address				
	GROVELAND, FL 34736				
		City/ State and Zip Code	· ·		
	gearhartbz@aol.com				
	É-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
BONNIE GEARHAR	Т	352	429-4718		
Name of Contact Person		Area Co) 429-4718 de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303			

Articles of Amendment to Articles of Incorporation of



AAA AMERICAN STORAGE, INC

(Name o	f Corporation as currently	filed with the Florida	Dept. of State)	
P99000046303				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporatio	on adopts the following	amendment(s) to
A. If amending name, enter the new na	ime of the corporation:			
name must be distinguishable and contain "inc.," or Co.," or the designation "C "chartered," "professional association,"	"orp," "Inc," or "Co". A		ed" or the abbreviation	
B. Enter new principal office address, (Principal office address MUST BE A S.)				
				,
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of			· •	
				
D. If amending the registered agent an new registered agent and/or the new		ess in Florida, enter the	name of the	
Name of New Registered Agent	BONNIE L. GEARHART			
	199 VILLA CITY ROAD			
	(Florida stre	et address)		
New Registered Office Address:	GROVELAND		34736 , Florida	
	(City)	Æip Ce	ide)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe		ith and accept the obliga	ttions of the position.	
	Bru & ful	gistered Agent, if changi	ina	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	РТ	JAMES L. GEARHART	199 VILLA CITY ROAD
Add			GROVELAND, FL 34736
Remove			
2) X Change	VS	BONNIE L. GEARHART	199 VILLA CITY ROAD
Add			GROVELAND, FL 34736
Remove 3.7 Change			
Add			
Remove			
4) Change			
Add			
Remove			
.5, Change			
Add			·
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
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If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
· · · · · · · · · · · · · · · · · · ·	

	ion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statutory filing requirement ment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareho	older action and shareholder
The amendment(s) was/were adopted by the shareholders was/were suffice	by the shareholders. The number of votes east for the ameent for approval.	endment(s)
	ed by the shareholders through voting groups. The followin h voting group entitled to vote separately on the amendmen	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
05-18-2020 Dated	Alt	
	or, president or other officer - if directors or officers have	
	an incorporator – if in the hands of a receiver, trustee, or conductory by that fiduciary)	other court
ВО	NNIE L. GEARHART	
	(Typed or printed name of person signing)	
SE	CRETARY	
_	(Title of person signing)	