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**Secretary of State** Application to Register a Foreign Limited Liability Company (LLC)

For Office Use Only

## -FILED-

File No.: 202464013431 Date Filed: 9/23/2024

Must be submitted with a current Certificate of Good Standing issued by the government agency where the LLC was formed.

Filing Fee - \$70.00

Certified Copy Fee (Optional) - \$5.00

Note: Registered LLCs in California may have to pay minimum \$800 tax to the

California Franchise Tax Board each year. For more information, go <a href="https://www.fib.ca.gov/">https://www.fib.ca.gov/</a> .	to	This Space Fo		iee Onlu	
1a. LLC Name (Enter the exact name of the LLC as listed on your attach	ad Cartificate of Gas		01100	, ou O.I.,	
Tel bile 1 state (Cinc) the exact hame of the CCC as hister on your attach	ed Certificate of God	d Standing.)			
Atlas Storage 5, LLC					
1b. California Alternate Name, If Required (Only enter an altern	ate name if the LLC	name in 1a not available in	n California.)	•	
2. LLC Jurisdiction (Ensure that the jurisdiction matches the attached	i Certificate of Good	Standing.)			
a. Jurisdiction (State, foreign country or place where this LLC is formed.)					
Dela	ware				
b. Authority Statement (Do not after Authority Statement)		<u> </u>			
This LLC currently has powers and privileges to conduct busing	ness in the state	, foreign country or pl	ace entere	ed in Ite	m 2a.
B. Business Addresses (Enter the complete business addresses. II	tems 3a and 3b cann	ot be a P.O. Box or "in car	re of an indi	ividual or e	entity.)
s. Street Address of Principal Office - Do not enter a P.O. Box	City (no abbrevial	ity (no abbreviations)		Zip Code	
1808 Wedemeyer St, Ste 221	San Francis	Francisco		94129	
Street Address of Principal Office in California, if any - Do not enter a P.O. Box	City (no abbrevial	City (no abbreviations)		Zip Code	
	<u> </u>	CA			
. If the Mailing Address is the same as item 3a or 3b, check the applicable box:	<b>√</b> 32 □3b				
d. Malling Address - if different than item 3a or 3b	City (no abbreviat	City (no abbreviations)		Zip Code	
4. Service of Process (Must provide either Individual OR Corporation	•				
INDIVIDUAL - Complete Items 4a and 4b only. Must include agent's fu	···-	<del> </del>			
t. California Agent's First Name (if agent is not a corporation)	Middle Name	Last Name			Suffix
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box	City (no abbrevia	liane)	State	Zip Cod	<u> </u>
). Street victions (ii again to hot a corporation) - so has alles o 1 to the	Caty (no approvia	on (no abbreviations)		- th cond	
CORPORATION - Complete Item 4c only. Only include the name of the	registered agent C		CA	<u> </u>	
California Registered Corporate Agent's Name (if agent is a corporation) - Do n					
Corporation Service Company Which Will Do Business In Calif			Service		
. Read and Sign Below (Title not required.)					
By signing, I affirm under penalty of perjury that the information behalf of the foreign LLC,	n herein is true a	and correct and that I	am autho	rized to	sign
flelel fler	Michael	Kremer			
Signature		Print Name			
LC-5 (REV 11/2023)	••		2023 Cal	ifornia Secre	etary of S

LLC-5

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ATLAS STORAGE 5, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TWENTY-THIRD DAY OF SEPTEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATLAS STORAGE 5, LLC" WAS FORMED ON THE ELEVENTH DAY OF DECEMBER, A.D. 2023.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



Authentication: 204459218

Date: 09-23-24