I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and

SIGNATURE: CHRISTIE RODA

Electronic Signature of Signing Authorized Person(s) Detail

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	RODA, CHRISTIE G	Name	RODA, THOMAS E
Address	PO BOX 340853	Address	PO BOX 340853
City-State-Zip:	TAMPA FL 33694	City-State-Zip:	TAMPA FL 33694

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000114565

Entity Name: RENTAL PROPERTIES OF TAMPA BAY IV LLC

Current Principal Place of Business:

4406 MEADOWWOOD WAY TAMPA, FL 33618

Current Mailing Address:

PO BOX 340853 **TAMPA FL 33694**

FEI Number: 46-3415371

Name and Address of Current Registered Agent:

RODA, CHRISTIE G 4406 MEADOWWOOD WAY TAMPA, FL 33694 US

that my name appears above, or on an attachment with all other like empowered. 02/13/2016 MGRM

Certificate of Status Desired: No

Date

Date

FILED Feb 13, 2016 Secretary of State CC8504049775