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(Re	equestor's Name)							
(Address)								
(Address)								
(Cit	ty/State/Zip/Phone	e #)						
PICK-UP	☐ WAIT	MAIL						
(Business Entity Name)								
(Document Number)								
Certified Copies Certificates of Status								
Special Instructions to Filing Officer:								
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: July 13, 2015

Order#: 696202/028

Re: CHURCHILL STATESIDE NC TAX CREDIT FUND II MANAGING

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

		me of the limited liability company: CHURCHILL STATI	ESIDE N	C TAX CREE	DIT FUND II MANAGING	MEMBER	i, LLC		
2. (a) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS))	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		CLEARWATER FL 33755	_						
		11/26/2013		L1300016				·	
3.		Date of filing/registration in Florida	4.		Document number	•			
5.	(a)	Keith J. Gloeckl			_				
	. ,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:							
		601 CLEVELAND STREET, SUITE 850							
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2	-				
			•			5743	23		
		CLEARWATER ,FL	33755	j	-		15	77	
(}	b)	Corporation Service Company		335E		-5	ILED		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office add	<u>dress</u> :			P¥ 2:	Ö	
		1201 Hays Street				25	Û		
		NEW Registered Office Address:			-	, per seni	_		
		Tallala			-				
		Tallahassee , FL	32301		_				
the ager	cha nt w /we	mited liability company is not organized under the law nge or changes are made, the Florida street address of table identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regis bility co f the lim limited l	stered office ompany, it i lited liabilit liability con	e and the business of s hereby confirmed the y company or as other	fice of th hat the ch	e regis nange(stered (s)	
Si	gna	are of member an authorized representative of a member	<u>-</u>		Printed or typed name o	f signee			
pro the to n	visio obli iere	accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address. I have the control of this change.	ee to act perform I for in C ereby co	in this cap ance of my Chapter 605 onfirm that	acity. I further agree duties, and I am fami 5, F.S. Or, if this doc the limited liability c	e to comp iliar with nument is company	ly wit and a being has be	h the iccept filed en	
Sign	ratu	e Pregistered Agent Corporation Service Company	BY: Sy	ylvia Quep	opet, Asst. Vice Pres	sident			