

# L14000138012

2018-03-03 14:25:09 CST

02122673573 From: Kimberly Laughrey

Division of Corporations

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations  
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### LLC REGISTERED AGENT CHANGE CHURCHILL STATESIDE NC TAX CREDIT FUND IV, LLC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
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JUN 05 2018

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.

1. Name of the limited liability company: CHURCHILL STATESIDE NC TAX CREDIT FUND IV, LLC

2. (a) 601 CLEVELAND STREET Suite 850 (b)

Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) CLEARWATER, FL 33755 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

09/04/2014 Date of filing/registration in Florida L14000138012 Document number

3. CORPORATION SERVICE COMPANY 4. Registered Agent and Registered Office shown on the records of the Florida Dept. of State

Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201 HAYS STREET TALLAHASSEE, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address: C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation, FL 33324

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Margaret Mohan, Authorized Person Signature of a member or authorized representative of a member Printed or typed name of signee

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: Alfred Younan Assistant Secretary Signature of Registered Agent

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00