(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:  AUG 7 1 2024							

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CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195							
REFERENCE : 594025 7641907							
AUTHORIZATION : 1000 0000000000000000000000000000000							
COST LIMIT : \$ 25.0							
ORDER DATE : August 14, 2024							
ORDER TIME : 12:14 PM							
ORDER NO. : 594025-002							
CUSTOMER NO: 7641907							
CHANGE OF AGENT							
NAME: ENCORE HOUSING OPPORTUNITY FUND INVESTMENT MANAGER, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Shauna Godbolt							
EXAMINER'S INITIALS:							

## 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.	Na	me of the limited liability company:	ING OF	PF —	PORTUNIT	Y FUND INVESTMENT MANAGER, LLC	
2.	(a)		Ć	b)			
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`		,\	Aailing address of limited liability company:  (Note: MAY BE POST OFFICE BON)	
		1 Town Center Road 600			1 Town Ce	enter Road 600	
		BOCA RATON, FL 33486	_		BOCA RA	TON, FL 33486	
		04/09/2010		1	м10000001	653	
3.		Date of filing/registration in Florida	4.	-	<del></del>	Document number	
-	(a)						
***	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  AVILA, ANTHONY					:	
		Registered Office Address (MUST BE FLORIDA STREET A.	DDRES.	:5)			
		1 Town Center Road 600					
		BOCA RATON . FL 3:				TOTA AUG 20 AM 9: 59	
						607	
	(b)				in a m		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Offi</u>			ce address:			
		Corporation Service Company					
		NEW Registered Office Address:					
		1201 Hays Street					
		Tallohaana	2204				
		Tallahassee F1.	32301				
cha age was	inge ent w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the r ill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egister oility co the lin	ec on nit	l office and apany, it is led liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
/s/Jill Cilmi J				Jill Cilmi, Authorized Person			
S	ignat	ure of a member or authorized representative of a member	-			Printed or typed name of signee	
pro the to i	visio obli nere	by accept the appointment as registered agent and agree ins of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address. I he in writing of this change.	erform	7/11	$ace$ of $m\dot{v}$ $d$	uties, and Lam Tamiliar with and accent-	
Sig	,natur	e of Registered Agent Grave E. Kirby, Asst Vice Presider	11				

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00 594025-2