## 1414000005041

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

Office Use Only



500372743835



2021 1/27 -4 AM ID:

Y SULKER NOV 0 5 2021 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 3230: Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE : 156848 4328604					
AUTHORIZATION: Spelle Recons					
COST LIMIT : \$25/00					
ORDER DATE: October 22, 2021					
ORDER TIME : 3:44 PM					
ORDER NO. : 156848-218					
CUSTOMER NO: 4328604					
CHANGE OF AGENT					
NAME: ARCP RL PORTFOLIO VII, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland					
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	ame of the limited liability company: ARCP RL PORT	FOLIC	) V	II, LLC	
2. (a)	2325 E. Camelback Road		(b)	2325 E.	Camelback Road
,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	9th Floor			9th Floor	·
	Phoenix, AZ 85016			Phoenix,	AZ 85016
	07/16/2014		٨	/1400000	95041
3.	Date of filing/registration in Florida	4.	-	-	Document number
5. (a)	C T CORPORATION SYSTEM				
` ,	Registered Agent and Registered Office shown on the records of t  1200 S PINE ISLAND RD  Registered Office Address (MUST BE FLORIDA STREET A			Dept. of Sta	— te: —
	PLANTATION, FL_	33324			- 29
(h.)					
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddr	ess:	- 177
	Corporation Service Company			_	2021 SON -4 MHO: 10 2021 SON -4 MHO: 10 2021 SON -4 MHO: 10
	NEW Registered Office Address:			<del></del>	SEE S
	1201 Hays Street				FATE
	Tallahassee, FL_	32301			_
change agent w was/we the artic	mited liability company is not organized under the laws or changes are made, the Florida street address of the r fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of these of organization or the operating agreement of the li	egister oility co the lin	ed om oite	office and pany, it is ed liability	d the business office of the registered shereby confirmed that the change(s)
	re of a member or authorized representative of a member	Jill	Cil	mi, Autho	rized Person
	$\overline{\mathcal{C}}$				Printed or typed name of signee
the oblig to mere	y accept the appointment as registered agent and agreens of all statutes relative to the proper and complete partions of my position as registered agent as provided by reflect a change in the registered office address. I he in writing of this change.	e to act erform for in ( reby co	in and Cho onf	this capa ce of my a upter 605, irm that t	wity. I further agree to comply with the luties, and I am familiar with and accept .F.S. Or, if this document is being filed he limited liability company has been
Signature	Drace C-Kuby of Registered Agent				
Grace I	E. Kirby, Asst. Vice President				