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SECRETARY OF STATE

K. SALY NOV 1 4 2016

## **COVER LETTER**

Registration Section

TO:

INHS18 (2/14)

Division of Corpo	rations				
RRCAP-SI SUBJECT:	RRCAP-SFR I, LLC				
<u></u>	Name of Limited Liability Company				
Dear Sir or Madam:					
The enclosed Registered A	gent/Registered Office Ch	ange and fe	e(s) are submitted for filing.		
Please return all correspon	dence concerning this matt	er to the fo	llowing:		
John W. Oakes, II, Es	٦.				
N	ame of Person		-		
River Rock Capital Pa	rtners, LLC				
Fi	rm/Company		•		
8015 W. Kenton Circle	e, Ste. 100				
	Address		•		
Huntersville, NC 2807	8				
City/S	tate and Zip Code		•		
joakes@riverrockcapit	alpartners.com				
E-mail address: (to b	e used for future annual rep	ort notifica	ition)		
For further information con	ncerning this matter, please	call:			
John W. Oakes, II, Esc	٦. at (at (	980	223-6043		
Name of P	erson		Area Code & Daytime Telephone Number		
STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, Florid	on rations nter Circle	Regis Divis P.O. 1	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314		
Enclosed is a chec	k for the following amou	nt:			
■ \$25 Filing Fee		<b>\$</b> 55	Filing Fee & Certified Copy		

## 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.

l. Na	ame of the limited liability company:				
2. (a)	C/O SouthCrest Realty, LLC	(b)			
	Principal office address of limited liability company:		ailing address of limited liability company:		
	(Note: MUST BE STREET ADDRESS) 970 Lake Carillon, Ste. 300		( <u>Note: MAY BE POST OFFICE BOX)</u> (enton Circle, Ste. 100		
	St. Petersburg, FL 33716	Charlotte,	Charlotte, NC 28078		
	June 12, 2015	M15000004	4625		
3. 5. (a)	Date of filing/registration in Florida Alan Scharsu	4. D	Occument number		
5. (a)	Registered Agent and Registered Office shown on the records				
	Registered Office Address (MUST BE FLORIDA STREE 2023 E. 7th Ave.	T ADDRESS)	2016 SEI		
	Tampa	33605	SOV ANY		
(b)	John W. Oakes, II, Esq.		2016 NOV 10 PH 6: 21 SECRETARY OF STATE SALLAHASSEE, FLORID		
(-)	Enter name of NEW Registered Agent and/or NEW Register	ed Office address:	FS		
	C/O SouthCrest Realty, LLC		TATE ORIDE		
	NEW Registered Office Address:				
	970 Lake Carillon Ste. 300				
	St. Petersburg	33716			
he cha gent w vas/we	imited liability company is not organized under the large or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the members of the members of the operating agreement of the members of the operating agreement of the ope	of the registered office a liability company, it is h of the limited liability c	and the business office of the registered tereby confirmed that the change(s) company or as otherwise provided in any.		
Signat	ture of a member or authorized representative of a member	P	rinted or typed name of signee		
! heret rovisi he obli o mere	by accept the appointment as registered agent and a cons of all statutes relative to the proper and completigations of my position as registered agent as provicely reflect a change in the registered office address, it in writing of this change.	gree to act in this capact le performance of my du led for in Chapter 605, I I hereby confirm that the	ity. I further agree to comply with the ties, and I am familiar with and accep F.S. Or, if this document is being filed c limited liability company has been		

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