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## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: RCH/KCP 2017 Fun Name of Foreign			
Name of Foreign	Limited Liabii	пу Сотра	itty
Dear Sir or Madam:			
The enclosed application, certificate and fee(s) a	re submitted fo	r filing.	
Please return all correspondence concerning this	matter to the fo	ollowing:	
Peter C. Jordan			
Name of Person			
RCH Capital, LLC			
Firm/Company			
360 Central Ave., Suite 1220	)		
Address			
St. Petersburg, FL 33701			
City/State and Zip Code			
petejordan@rchcapital.com			
E-mail address: (to be used for future annual r	report notificati	on)	
For further information concerning this matter, p	lease call:		
Peter C. Jordan	$_{\rm at}$ 727 .	497-4	4042
Name of Person	Area Code	& Daytime	e Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee, Florida 32314
Enclosed is a check for the following amount:  \$\begin{align*}	S55 Filin Certified	_	S60 Filing Fee, Certificate of Status & Certified Copy

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

## SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the record	s of the Florida Department of		
State: RCH/KCP 2017 FUND NP, LLC			
Enter new principal office address, if applicable:			<u></u>
(Principal office address  MUST BE A STREET ADDRESS)			<u> </u>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		100 mm m	- 70F 61J
2. The Florida document number of this limited liability company	is: M17000009851	774	5 A
3. Jurisdiction of its organization: DELAWARE	·		rò -
4. Date authorized to do business in Florida: NOVEMBE	R 20, 2017	<del>}</del>	ಲ <u>1</u>
SECTION II (5-9 complete only the applicable changes)			
5. New name of the limited liability company: (must contain "Lim	ted Liability Company, ""L.L.C.	.," or "Li	LC.")
(If name unavailable, enter alternate name adopted for the purpos copy of the written consent of the managers or managing member must contain "Limited Liability Company," "L.L.C." or "LLC.")			
6. If amending the registered agent and/or registered officer address tegistered agent and/or the new registered office address here:	ss on our records, enter the name	e of the ne	<u>ew</u>
Name of New Registered Agent:			
New Registered Office Address:	F		
	Enter Florida Street Address		
<del> </del>	City Florida, Florida	Zip Code	,
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent and agree to the provisions of all statutes relative to the proper and complete p and accept the obligations of my position as registered agent as p document is being filed to merely reflect a change in the registered liability company has been notified in writing of this change.	act in this capacity. I further agr performance of my duties, and I a provided for in Chapter 605, F.S.	am familie Or, if thi	ar with is

itle/ Capacity	<u>Name</u>	Address Type of Act
MGR	Ryan S. Razook	360 Central Ave., Suite 1220∧dd
		St. Petersburg, FL 33701
		Add
		Rem
		Remo
		Remo
		Add
aforemention	certificate, if required: no more than the control of the control of the certificated ander the law of which this entity is or the control of the certificated and certificated	by the official having custody of records in the

Filing Fee: \$25.00