## Division of Corporations **Electronic Filing Cover Sheet**

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## LLC REGISTERED AGENT CHANGE GENROCK INVESTMENT FUND I GP, LLC

Certificate of Status	U
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Y SULKER

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.

I. Na	me of the limited liability company: GenRock Inves	stment Fund I C	GP, LLC			
2. (a)	c/o GenRock Capital Management, LP	(b)	(b) c/o GenRock Capital Management, LP			
~. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY RE POST OFFICE BOX)  214 Brazilian Avenue, Suite 101  Palm Beach, ΓL 33480			
	214 Brazilian Avenue, Suite 101	2				
	Patm Beach, FL 33480					
	02/27/2019	М	19000002031			
3.	Date of filing/registration in Florida	<u> </u>	Document nun	aber		
5. (a)						
J. (4)	Registered Agent and Registered Office shown on the records Matthew Ailey	of the Florida D	ept, of State:			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	231 Royal Palm Way, Ste 302			. 3		
	Palm Beach	FL_33480				
	ranu ocaca	FL		=	!	
41.3				27	•	
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office addre	<u></u>	<u>;</u>		
	Matthew Ailey			. 2	,	
	NEW Registered Office Address:		<del></del>	. )		
	214 Brazilian Avenue, Suite 101					
	Palm Beach	FL 33480				
the cha agent was/w the art	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street in the contract of the street in the contract of the street in the contract of the contrac	laws of the S of the registe Hiability com rs of the limit the limited lia	ered office and the busing pany, it is hereby confined liability company or a bility company.	ess office of the re med that the chans	gisterea ic(s)	
	latthew Ailey ture of a member or authorized representative of a member	Matth	w Ailey Printed or typed	name of signer		
I here provis the ob to mer notifie	thate of a member of authorized representative of a member of a member of authorized representative to the proper and completing at the proper at the proper at the proper and at the proper at t	agree to act i eie performa ided for in CI , I hereby con	n this zanzwite. I further	· aaree to comnly s	vith the d accept ng filed been	
,	rre of Registered Agent					

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