122000001287

(Address) (Address) (City/State/Zip/Phone #)							
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ed Copies Certificates of Status							
al Instructions to Filing Officer.							

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CORPORATION SERVICE COMPANY

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

ACCOUNT NO. : I2000000195 REFERENCE : 348915 AUTHORIZATION COST LIMIT : \$ ORDER DATE: January 12, 2023 ORDER TIME : 2:33 PM ORDER NO. : 348915-079 CUSTOMER NO: 8137683 CHANGE OF AGENT NAME: ROF SPV I, 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. 1	Name of the limited liability company: ROF SPV I, L	LC						
2. (a	1		(h)					
4. (11	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing add	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) OWN CENTER DRIVE, STE 130			
	1160 N TOWN CENTER DRIVE, STE 130			1160 N TOWN CE				
	LAS VEGAS, NV 89144			LAS VEGAS, NV 8	39144			
	01/26/2022		N	M22000001287				
3.	Date of filing/registration in Florida	4.		Documer	nt number			
5. (a	a)							
`	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: CAPITOL CORPORATE SERVCIES, INC.							
	Registered Office Address (MUST BE FLORIDA STREE	T,4DDR.	ESS)		SECI TA	2023、	 	
	TALLAHASSEE, FL_3 (b) Enter name of NEW Registered Agent and/or NEW Registered Of Corporation Service Company				TL AH	E IL. 2023 JAH 19 SECRETAR TALLAH		
(b				ress:	ARY OF STATE AHASSEE, EI	MH 10: 25		
	NEW Registered Office Address:							
	1201 Hays Street		_	_ _				
	Tallahassee I	ել 3230	1					
chang agent was/v the ar	limited liability company is not organized under the lage or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticks of organization or the operating agreement of the companion of the	ne regist liability s of the ne limite	ered com limit d lia	office and the busing any, it is hereby coded liability company bility company. Imi, Authorized Personal Perso	ness office of the confirmed that the cy or as otherwise	registe chang provid	ered ge(s)	
I her provi the ot to me notifi	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and complet bligations of my position as registered agent as provia rely reflect a change in the registered office address, ed in writing of this change.	gree to de le perfoi led for i I hereby	act ir rman n Ch r con	rthis capacity. I fu	rther avree to co	mple u	ith the l accept 19 filed been	
Signa	ture of Registered Agent							

Grace E. Kirby, Asst. Vice President

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314

FILING FEE: \$25.00