



PLEASE CHECK ALL BLUEROCK HIGH INCOME FUND INVESTMENTS THAT APPLY:

- Acct #: _____
- Bluerock High Income Fund A Share _____
- Bluerock High Income Fund C Share _____
- Bluerock High Income Fund I Share _____

Complete this form and return to address below.

Regular Mail: Bluerock High Income Institutional Credit Fund
 C/O DST Systems, Inc.,
 P.O. Box 219445
 Kansas City, MO 64121-9445

Overnight Address: Bluerock High Income Institutional Credit Fund
 C/O DST Systems, Inc.,
 801 Pennsylvania Ave., Suite 219445
 Kansas City, MO 64105-1307

Fax: 833-742-3074
 (Fax only accepted on non-custodial accounts)

INSTRUCTIONS Please complete all applicable sections depending upon your account change(s). Check all boxes that apply.

- CHANGE OF ADDRESS** (Sections 1, 2 & 5) **CHANGE OF REPRESENTATIVE OR BROKER-DEALER** (Sections 1, 3 & 5) **DISTRIBUTION INSTRUCTIONS** (Sections 1, 4 & 5)

1.) CURRENT ACCOUNT OWNER INFORMATION

ACCOUNT NAME(S)

TELEPHONE NUMBER

□□□□ - □□□□ - □□□□□□

REGISTERED OWNER'S SSN

□□□□ - □□ - □□□□□□

2.) CHANGE OF ADDRESS

If you are providing an address outside of the U.S., please complete the following by indicating citizenship status (REQUIRED):

- U.S. Citizen Resident Alien Non-Resident Alien

If non-resident alien, investor must submit the appropriate W-8 form (W-8BEN, W-8ECI, W8EXP OR W8IMY).

Please indicate whether the change of address pertains to the:

- Mailing Address or Alternate Address

ADDRESS

CITY

STATE

□□

ZIP CODE

□□□□□□

NEW HOME TELEPHONE NUMBER

□□□□ - □□□□ - □□□□□□

NEW BUSINESS TELEPHONE NUMBER

□□□□ - □□□□ - □□□□□□

NEW E-MAIL ADDRESS

3.) CHANGE OF REPRESENTATIVE OR BROKER-DEALER

If the account owner chooses to change from one registered representative to another within the same broker-dealer, a signature is only required from an authorized principal of the broker-dealer. If the account owner chooses to transfer account(s) to a different broker-dealer, all registered account owners and an authorized principal from the new broker-dealer must sign. The registered representative on the account may **not** sign as the authorized principal for the broker-dealer. For custodial accounts, a Medallion Guarantee stamp or appropriate authorization from the custodian is required in section 5.

NEW FIRM NAME

NEW REGISTERED REPRESENTATIVE

FIELD REPRESENTATIVE NUMBER

BRANCH ADDRESS

CITY

STATE

□□

ZIP CODE

□□□□□□

TELEPHONE NUMBER

□□□□ - □□□□ - □□□□□□

FAX NUMBER

□□□□ - □□□□ - □□□□□□

SIGNATURE BY
 AUTHORIZED PRINCIPAL
 REQUIRED
