Division of Corporal

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LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION NORTHPOINT CAPITAL, LLLP

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$52.50 |

12/18/09 1:34 PM

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CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

| | ~ * | | | | |
|---|--|---|-------------|--|--|
| NORTHPO | INT CAPITAL | . LLLP | | | |
| Insert name currently o | | | 5 | | |
| Pursuant to the provisions of section 620.1202, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose cortificate was filed with the Florida Department of State of 11/13/2008, assigned Florida document number A08000000958 adopts the following certificate of amendment to its certificate of limited partnership. | | | | | |
| This amendment is submitted to amend the following | ng: | | | | |
| A. If amending name, <u>enter the new pame of ti</u> here: | to limited parmers | nip or limited liability limited partn | ership | | |
| New name must be disting | uishable and contain a | n acceptable suffix. | | | |
| Acceptable Limited Parimenship suffixes: Limited Parin Acceptable Limited Liability Limited Parimership suffix | | | | | |
| B. If amending mailing address and/or principal office address here: | ncipal office addr | ess, <u>enter new maili</u> ng <u>address a</u> | nd/or | | |
| New Principal Office Address: | | | | | |
| (Must he STREET address) | | | | | |
| New Mailing Address: (May he past affice bax) | | | | | |
| C. If amending the registered agent and/or registered agent and/or registered agent and/or the new registered o | sistered office addr office address here: | ess on our records, enter the name | of the | | |
| Name of New Registered Agent: | | | | | |
| New Registered Office Address: | French | Torida stracı address | | | |
| | BRICE P | | | | |
| | Cily | Florida Zip Code | | | |
| | | | | | |

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New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, am familiar with and accept the obligations of my position as registered agent.

If Changing Registered Agent, Signature of New Registered Agent

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

| Title | Name | Address | Type of Action | | |
|---|---|---|--------------------------|--|--|
| GP | MILAGRO MANAGEMENT, LLC | 1250 BAY POINT TER ALPHARETTA GA 30005 | ☐ Add ☑ Remove | | |
| <u>GP</u> | Northpoint Capital, LLC #M08000005004 | 1250 BAY POINT JER ALCHARETTA GA 30005 | ☑Add □Remove | | |
| | | | Add Remove | | |
| | | | Add Remove | | |
| | | | Add Remove | | |
| | | | Add Remove | | |
| limited partne | ted partnership or limited liability rship" status, enter change here: | | | | |
| This Lin | nited Partnersbip hereby elects to be | a "Limited Liability Limited Pa | rtnership. ¹³ | | |
| | and Downership hereby respoves its | "Limited Liability Limited Par- | tnership" status. | | |
| NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this omendment.) | | | | | |

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| F. If amending any other information. | , enter change(s) here: (Attach additional sheets, if rice and) |
|---|---|
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| | & 5 |
| | R.A. |
| | 24 |
| | |
| Toffeeling late if the character the day of the | |
| Effective date, if other than the date of fili (Effective date cannot be prior to nor more than 9) | ng; I days after the date this document is filed by the Florida Department of |
| State.) | • |
| | |
| Signature(s) of a general partner or all | general pariners*: |
| | |
| removing a "Ilmited liability limited partnership" of | uired to sign this document unless the limited partnership is adding or election statement. Chapter 520, F.S., requires all general partners to sign |
| when adding or temoving a "limited flability limite | ed partnership" election statement.) |
| | |
| | |
| MILAGRO MANAGEMENT, LLC | |
| | |
| | |
| | |
| Signature(s) of all new or dissociating g | read namental (Cabri |
| Signature (a) Or an new Or Wassociating g | energy partnersy, n. any. |
| | |
| - \ | |
| NORTHPOINT CAPITAL, LLC | |
| <i>(</i> | |
| | |
| | |
| | |
| Filing Fee: \$52.50 | |
| Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75 | |