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(R	equestor's Name)		
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Reinstatement

UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

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Ш	ING & SEARCH				March 13, 2008
S	ERVICES	C	ORPORATION NAM	IE (S) AND DOCUM	MENT NUMBER (S):
		Aviance Ca	apital Partners, LLC		FG \$ 1
					五一 3
(Filing Evidence Plain/Confirmation			Type of Docume Certificate of State	
	□ Certified Copy		٥	Certificate of Goo	od Standing
			٥	Articles Only	
	Retrieval Reque	est		All Charter Docu Articles & Amend Fictitious Name C	dments
	□ Certified Copy			Other	
	NEW FILINGS		AMENDMENTS	,	
	Profit		Amendment		
	Non Profit		Resignation of RA O	fficer/Director	
X	Limited Liability		Change of Registered	l Agent	
	Domestication		Dissolution/Withdray	val	
	Other		Merger		
	OTHER FILINGS		REGISTRATION/Q	UALIFICATION	
Х	Annual Reports		Foreign		
	Fictitious Name		Limited Liability		
	Name Reservation		Reinstatement		

Trademark

Other

	apany is: my, "Limited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE I - Name:		
The name of the Limited Liability Com	apany is:	
Aviance Capital Partners, LLC		
(Must end with the words "Limited Liability Compa	my, "Limited Company" or their abbreviation "LLC," or "L.C.,")	
ARTICLE II - Address:	The second se	
The mailing address and street address	of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
2080 Ringling Boulevard	2080 Ringling Boulevard	
Sarasota, Florida 34237	Sarasota, Florida 34237	
business entity with an active Florida registration.) The name and the Florida street addres	•	
NRAI Services, Inc.		
	Name	
2731 Executive Park D	rive, Suite 4	
Florida street address (P.O. Box NOT acceptable)		
Weston	FL ₂ 33331	
C	ity, State, and Zip	
liability company at the place design registered agent and agree to act in thi	nt and to accept service of process for the above stated limited nated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of all implete performance of my duties, and I am familiar with and	
accept the obligations of my position	n as registered agent as provided for in Chapter 608, F.S.	

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Michael J. Dixon 2080 Ringling Boulevard Sarasota, FL 34237 **MGRM** Edward C. Bertelsen 2080 Ringling Boulevard Sarasota, FL 34237 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: . (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) By: Myra C Gibson Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)